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**Board:**  
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David W. Gillespie, MD

**South Carolina Board of Health and Environmental Control  
December 7, 2017**

Call to Order – 10:00 a.m., Board Room (#3420)

South Carolina Department of Health and Environmental Control, 2600 Bull Street, Columbia, S.C.

1. Minutes of the November 9, 2017 meeting
2. Administrative Orders, Consent Orders and Sanction Letters issued by Health Regulation
3. Administrative Orders, Consent Orders and Consent Agreements issued by Environmental Affairs
4. Public Hearing for Notice of Final Regulation for Proposed New Regulation 61-118, South Carolina Stroke Care Systems, Document No. 4760, General Assembly review is required
5. Agency Affairs

Executive Session (if needed)

Adjournment

*Note: The next scheduled meeting January 4, 2018.*

SUMMARY SHEET  
SOUTH CAROLINA BOARD OF HEALTH AND ENVIRONMENTAL CONTROL

December 7, 2017

( ) ACTION/DECISION

( X ) INFORMATION

**I. TITLE:** Health Regulation Administrative and Consent Orders.

**II. SUBJECT:** Health Regulation Administrative Orders, Consent Orders, and Emergency Suspension Orders for the period of October 1, 2017, through October 31, 2017.

**III. FACTS:** For the period of October 1, 2017, through October 31, 2017, Health Regulation reports ten (10) Consent Orders with a total of seventy-nine thousand one hundred dollars (\$79,100) in assessed monetary penalties.

Health Regulation Bureau	Health Care Facility, Provider, or Equipment	Administrative Orders	Consent Orders	Emergency Suspension Orders	Assessed Penalties
Health Facilities Licensing	Community Residential Care Facility	0	6	0	\$77,000
	Tattoo Facility	0	1	0	\$2,100
EMS & Trauma	Paramedic	0	1	0	\$0
	EMT	0	2	0	\$2,500
<b>TOTAL</b>		<b>0</b>	<b>10</b>	<b>0</b>	<b>\$81,600</b>

Approved By:

  
 Shelly Bezanson Kelly  
 Director of Health Regulation

HEALTH REGULATION ENFORCEMENT REPORT  
SOUTH CAROLINA BOARD OF HEALTH AND ENVIRONMENTAL CONTROL

December 7, 2017

**Bureau of Health Facilities Licensing**

Facility Type	Total # of Beds or Participants	Total # of Licensed Facilities in South Carolina
Community Residential Care Facility	19,144	479

**1. Reese's Community Care Home #1 (CRCF) – Columbia, SC**

Investigation: The Department visited Reese's Community Care Home #1 ("Reese's") on April 20, 2016, June 28, 2016, and June 1, 2017, to conduct general inspections, June 29, 2016, to conduct a food and sanitation inspection, and January 25, 2017, for a follow-up inspection.

Violations: Based upon the inspections, the Department cited Reese's for twenty (20) violations of Regulation 61-84, Standards for Licensing Community Residential Care Facilities. Specifically, Reese's was cited one (1) time for violating Section 202.C, for failing to timely grant Department representatives access to staff records; one (1) time for violating Section 501.A, for failing to perform a criminal background check on a staff member; one (1) time for violating Section 503.B.2, for failing to have a staff member awake, dressed, and able to respond to residents' needs during non-peak hours; three (3) times for violating Section 504.A, for failing to have required documentation of staff training; one (1) time for violating Section 505.A, for failing to have documentation of a staff member's health assessment; two (2) times for violating Section 703.A, for failing to review and/or revise residents' ICPs at least semi-annually; one (1) time for violating Section 901.C, for failing to administer prescribed medications to residents; one (1) time for violating Section 1101.A, for failing to have documentation of current annual physical examinations for residents; two (2) times for violating Section 1201.A, for failing to have residents' prescribed medications available for administration; two (2) times for violating Section 1203, for failing to follow requirements for medication administration records; one (1) time for violating Section 1206.C.1, for failing to have documented review of medication control sheets; one (1) time for violating Section 1303.F, for failing to ensure menus listed specific times for serving meals; one (1) time for violating Section 1702.D.2.a, for failing to comply with tuberculosis testing requirements; and two (2) times for violating Section 1703, by failing to ensure the facility was kept free of vermin and offensive odors.

Enforcement Action: Pursuant to the Consent Order executed October 25, 2017, the Department assessed a nine thousand six hundred dollar (\$9,600) monetary penalty against Reese's. The Consent Order required Reese's to submit four thousand dollars (\$4,000) of the assessed monetary penalty in four (4) consecutive monthly payments of one thousand dollars (\$1,000). The remainder of the assessed monetary penalty will be stayed upon a six (6) month period of substantial compliance with the terms of the Consent Order and R.61-84. Additionally, Reese's agreed to correct the violations that initiated this enforcement action and ensure that all violations of R.61-84 are not repeated. Finally, Reese's agreed to schedule and attend a compliance assistance meeting with Department representatives within forty-five (45) days of execution of the Consent Order.

Prior Sanctions: On November 26, 2012, the Department executed a Consent Order assessing a monetary penalty of forty-nine thousand dollars (\$49,000) against Reese's for violations of R.61-84. The November 2012 Consent Order required payment of twelve thousand six hundred dollars (\$12,600) of the assessed

monetary penalty with the remainder held in abeyance. Subsequently, the Department reduced the amount due to nine thousand six hundred dollars (\$9,600) on December 10, 2012.

## **2. Country Comfort Community Home (CRCF) – Blythewood, SC**

Investigation: The Department visited Country Comfort Community Home (“Country Comfort”) on April 14, 2016, and June 9, 2017, to general inspections, December 16, 2016, and January 9, 2017, to conduct complaint investigations, and February 3, 2017, to conduct a follow-up inspection.

Violations: Based upon the inspections, the Department cited Country Comfort for twenty-one (21) violations of Regulation 61-84, Standards for Licensing Community Residential Care Facilities. Specifically, Country Comfort was cited one (1) time for violating Section 401, for failing to review policies and procedures annually per facility policy; two (2) times for violating Section 504.A, for failing to maintain required documentation of staff training; one (1) time for violating Section 701.B.6, for failing to document notes of observation on a monthly basis for four (4) residents; one (1) time for violating Section 703.A, for failing to develop a resident’s ICP within seven (7) days of admission; one (1) time for violating Section 704.H, for failing to maintain a resident’s record at the facility; one (1) time for violating Section 801.B, for admitting a resident inappropriate for care in a CRCF; one (1) time for violating Section 1001.A, for failing to comply with requirements for discharge notices; one (1) time for violating Section 1101.B, for failing to have documentation of a two-step tuberculin skin test for a resident; one (1) time for violating Section 1201.A, for failing to have a resident’s medication available for administration; one (1) time for violating Section 1203.F, for failing to have documented reviews of medication administration records; two (2) times for violating Section 1206.C, for failing to comply with requirements for controlled substances; two (2) times for violating Section 1303.E, for failing to ensure the same foods were not served repeatedly during a seven (7) day period; one (1) time for violating Section 1306.A, for failing to document substitutions to the posted menu; one (1) time for violating Section 1403, for failing to have a written plan to ensure the continuation of essential resident support services; three (3) times for violating Section 1703, for failing to ensure the facility was free of vermin; and one (1) time for violating Section 2602.A.1, for failing to ensure mattresses on residents’ beds had moisture-proof covers.

Enforcement Action: Pursuant to the Consent Order executed October 19, 2017, the Department assessed a seven thousand six hundred dollar (\$7,600) monetary penalty against Country Comfort. The Consent Order required Country Comfort to submit one thousand five hundred dollars (\$1,500) of the assessed monetary penalty in four (4) consecutive monthly payments of five hundred dollars (\$500). The remainder of the assessed monetary penalty will be stayed upon a six (6) month period of substantial compliance with the terms of the Consent Order and R.61-84. Additionally, Country Comfort agreed to correct the violations that initiated this enforcement action and ensure that all violations of R.61-84 are not repeated. Finally, Country Comfort agreed to schedule and attend a compliance assistance meeting with Department representatives within forty-five (45) days of execution of the Consent Order.

Prior Sanctions: None.

## **3. Oakridge Community Care Home #1 (CRCF) – Inman, SC**

Investigation: The Department visited Oakridge Community Care Home #1 (“Oakridge #1”) on September 21, 2016, and May 24, 2017, to conduct complaint investigations, and March 30, 2017, to conduct a general inspection.

Violations: Based upon the inspections, the Department cited Oakridge #1 for nineteen (19) violations of Regulation 61-84, Standards for Licensing Community Residential Care Facilities. Specifically, Oakridge #1 was cited three (3) times for violating Section 202.D, for failing to submit or failing to timely submit

Plans of Correction; one (1) time for violating Section 501.A, for failing to have documentation of a criminal background check for a staff member available for review; one (1) time for violating Section 501.D.3, for failing to ensure a staff member was able to demonstrate a working knowledge of R.61-84; one (1) time for violating Section 501.F, for failing to have documentation of a staff member's job duties and responsibilities available for review; one (1) time for violating Section 503.B.2, for failing to maintain required staffing levels; one (1) time for violating Section 504.B, for failing to have documentation of a staff member's orientation to the facility; one (1) time for violating Section 505.A, for failing to ensure a staff member's health assessment was completed within twelve (12) months prior to resident contact; one (1) time for violating Section 601.C, for failing to follow reporting requirements for accidents and/or incidents; one (1) time for violating Section 703.A, for failing to develop a resident's ICP within seven (7) days of admission; three (3) times for violating Section 902, for failing to have reports residents' personal monies available for review; two (2) times for violating Section 1101.A, for failing to ensure residents' physical examinations were completed within thirty (30) days prior to admission; and three (3) times for violating Section 1702, for failing to follow Department requirements for tuberculosis testing.

Enforcement Action: Pursuant to the Consent Order executed October 12, 2017, the Department assessed a fifteen thousand dollar (\$15,000) monetary penalty against Oakridge #1. The Consent Order required Oakridge #1 to submit seven thousand five hundred dollars (\$7,500) of the assessed monetary penalty within thirty (30) days of execution of the Consent Order. The remainder of the assessed monetary penalty will be stayed upon a six (6) month period of substantial compliance with the terms of the Consent Order and R.61-84. Additionally, Oakridge #1 agreed to correct the violations that initiated this enforcement action and ensure that all violations of R.61-84 are not repeated. Finally, Oakridge #1 agreed to schedule and attend a compliance assistance meeting with Department representatives within forty-five (45) days of execution of the Consent Order. The assessed monetary penalty was received October 5, 2017.

Prior Sanctions: On May 21, 2015, the Department executed a Consent Order assessing a monetary penalty of nine thousand five hundred dollars (\$9,500) against Oakridge #1 for violations of R.61-84. The May 2015 Consent Order required payment of three thousand dollars (\$3,000) of the assessed monetary penalty with the remainder held in abeyance. Oakridge #1 paid the penalty May 8, 2015. On June 30, 2016, the Department called in three thousand dollars (\$3,000) of the monetary penalty in abeyance due to Oakridge #1's non-compliance during inspections conducted in the twelve (12) months following execution of the May 2015 Consent Order. Oakridge #1 paid the called-in penalty July 7, 2016.

#### **4. Oakridge Community Care Home #2 (CRCF) – Inman, SC**

Investigation: The Department visited Oakridge Community Care Home #2 ("Oakridge #2") on May 6, 2016, and September 21, 2016, to conduct complaint investigations, June 10, 2016, to conduct a follow-up inspection, and March 30, 2017, to conduct a general inspection and food and sanitation inspection.

Violations: Based upon the inspections, the Department cited Oakridge #2 for sixteen (16) violations of Regulation 61-84, Standards for Licensing Community Residential Care Facilities. Specifically, Oakridge #2 was cited four (4) times for violating Section 202.D, for failing to submit or timely submit Plans of Correction; one (1) time for violating Section 401, for failing to ensure its policies and procedures addressed each section of R.61-84; one (1) time for violating Section 501.A, for failing to have documentation of a criminal background check for a staff member available for review; two (2) times for violating Section 504.A, for failing to have documentation of staff training available for review; one (1) time for violating Section 801.B, by admitting or retaining a resident who was inappropriate for placement in a CRCF; two (2) times for violating Section 902, for failing to have reports residents' personal monies available for review; two (2) times for violating Section 1203.A, for failing to document administration of medications to residents on medication administration records; one (1) time for

violating Section 1206.C.1, for failing to ensure control sheets documented the date and time controlled medications were removed from stock; one (1) time for violating Section 1301.A, for failing to ensure the facility's food preparation met the requirements of Regulation 61-25, *Retail Food Establishments*; and one (1) time for violating Section 1702.F.1, for failing to have documentation of a declaration by Adult Protective Services that a resident's admission was an emergency.

Enforcement Action: Pursuant to the Consent Order executed October 12, 2017, the Department assessed a ten thousand dollar (\$10,000) monetary penalty against Oakridge #2. The Consent Order required Oakridge #2 to submit three thousand dollars (\$3,000) of the assessed monetary penalty within thirty (30) days of execution of the Consent Order. The remainder of the assessed monetary penalty will be stayed upon a six (6) month period of substantial compliance with the terms of the Consent Order and R.61-84. Additionally, Oakridge #2 agreed to correct the violations that initiated this enforcement action and ensure that all violations of R.61-84 are not repeated. Finally, Oakridge #2 agreed to schedule and attend a compliance assistance meeting with Department representatives within forty-five (45) days of execution of the Consent Order. The assessed monetary penalty was received October 5, 2017.

Prior Sanctions: None.

## **5. Cabading Homes #1 (CRCF) – Charleston, SC**

Investigation: The Department visited Cabading Homes #1 ("Cabading #1") on April 20, 2016, and June 1, 2017, to conduct general inspections, June 28, 2016, to conduct a follow-up inspection and food and sanitation inspection, January 25, 2017, to conduct a follow-up inspection, and June 8, 2017, to conduct a complaint investigation.

Violations: Based upon the inspections, the Department cited Cabading #1 for forty-one (41) violations of Regulation 61-84, Standards for Licensing Community Residential Care Facilities. Specifically, Cabading #1 was cited two (2) times for violating Section 501.A, for failing to have documentation of criminal background checks for staff members; twelve (12) times for violating Section 504.A, for failing to have documentation of required inservice training for staff members; one (1) time for violating Section 703.A, for failing to revise a resident's ICP as changes in the resident's needs occurred; one (1) time for violating Section 902.G, for failing to have written evidence of purchases by the facility on behalf of the residents; one (1) time for violating Section 1205.C, for failing to attach new labels to a resident's medication when a physician changes the dosage; one (1) time for violating Section 1206.A, for storing expired or discontinued medications with current medications; two (2) times for violating Section 1206.C.2, for failing to have documented reviews of control sheets for controlled substances; one (1) time for violating Section 1301.A, for failing to ensure the facility's food preparation met the requirements for Regulation 61-25, *Retail Food Establishments*; two (2) times for violating Section 1601, for failing to maintain the facility's equipment and building components in good repair and operating condition; two (2) times for violating Section 1702.B, for failing to have current annual risk assessments; one (1) time for violating Section 1702.D.2.a, for failing to follow Department guidelines for tuberculosis testing of a resident; four (4) times for violation Section 1703, for failing to keep the facility free of vermin; three (3) times for violating Section 1703.A.1, for failing to ensure the facility was kept clean and free of vermin and offensive odors; two (2) times for violating Section 1703.A.3, for failing to ensure chemicals indicated as harmful on the product label were safely stored and inaccessible to residents; one (1) time for violating Section 2104.A, for failing to properly secure oxygen canisters in place; two (2) times for violating Section 2301.B, for failing to maintain required temperatures at plumbing fixtures; one (1) time for violating Section 2604.C, for failing to ensure liquid soap and a sanitary method for hand drying was available in public restrooms and bathrooms used by more than one (1) resident; and one (1) time for violating Section 2608, for failing to have insect screens on windows used for ventilation.

Enforcement Action: Pursuant to the Consent Order executed October 4, 2017, the Department assessed a nineteen thousand dollar (\$19,000) monetary penalty against Cabading #1. The Consent Order required Cabading #1 to submit six thousand dollars (\$6,000) of the assessed monetary penalty in four (4) consecutive monthly payments of one thousand five hundred dollars (\$1,500). The remainder of the assessed monetary penalty will be stayed upon a six (6) month period of substantial compliance with the terms of the Consent Order and R.61-84. Additionally, Cabading #1 agreed to correct the violations that initiated this enforcement action and ensure that all violations of R.61-84 are not repeated. Finally, Cabading #1 agreed to schedule and attend a compliance assistance meeting with Department representatives within forty-five (45) days of execution of the Consent Order. The Department received the first payment from Cabading #1 on November 9, 2017.

Prior Sanctions: None.

## **6. Cabading Homes #2 (CRCF) – Charleston, SC**

Investigation: The Department visited Cabading Homes #2 (“Cabading #2”) on September 22, 2015, to conduct a fire and life safety inspection, April 20, 2016, and June 1, 2017, to conduct general inspections, June 28, 2016, and January 25, 2017, to conduct follow-up inspections, and August 2, 2016, to conduct complaint investigations.

Violations: Based upon the inspections, the Department cited Cabading #2 for forty-one (41) violations of Regulation 61-84, Standards for Licensing Community Residential Care Facilities. Specifically, Cabading #2 was cited one (1) time for violating Section 103.F, for failing to ensure that only staff members, volunteers, and/or owners of the facility and members of the owner’s immediate family resided in the facility; eleven (11) times for violating Section 504.A, for failing to have documentation of required inservice training for staff members; two (2) times for violating Section 701.B, for failing to have required entries in residents’ records; one (1) time for violating Section 703.A, for failing to ensure a resident’s ICP was signed by the resident, resident’s sponsor, and/or responsible party; one (1) time for violating Section 906.A, for failing to provide a resident a thirty (30) day notice of discharge in accordance with the *Bill of Rights for Residents of Long-Term Care Facilities*; two (2) times for violating Section 1101, for failing to have required documentation of residents’ physical examinations and tuberculin skin tests; one (1) time for violating Section 1203.A, for failing to ensure medication administrations were recorded on medication administration records; two (2) times for violating Section 1206.C.2, for failing to have documented reviewed of control sheets at each shift change; one (1) time for violating Section 1303.E, for repeatedly serving the same foods during a seven (7) day period; three (3) times for violating Section 1601, for failing to maintain the facility’s equipment and building components in good repair and operating condition; three (3) times for violating Section 1702, for failing to follow Department requirements for tuberculin skin testing; seven (7) times for violating Section 1703, for failing to maintain good housekeeping practices; two (2) times for violating Section 1706.B.3, for failing to ensure soiled linen and clothing was kept in enclosed or covered containers; two (2) times for violating Section 2602.A.1, for failing to ensure a resident had a comfortable bed and mattresses on residents’ beds had moisture-proof covers in good repair; and two (2) times for violating Section 2604.C, for failing to ensure bathrooms had a sanitary individualized method of hand drying.

Enforcement Action: Pursuant to the Consent Order executed October 4, 2017, the Department assessed a fifteen thousand eight hundred dollar (\$15,800) monetary penalty against Cabading #2. The Consent Order required Cabading #2 to submit four thousand dollars (\$4,000) of the assessed monetary penalty in four (4) consecutive monthly payments of one thousand dollars (\$1,000). The remainder of the assessed monetary penalty will be stayed upon a six (6) month period of substantial compliance with the terms of the Consent Order and R.61-84. Additionally, Cabading #2 agreed to correct the violations that initiated this enforcement action and ensure that all violations of R.61-84 are not repeated. Finally, Cabading #2 agreed to schedule and attend a compliance assistance meeting with Department representatives within

forty-five (45) days of execution of the Consent Order. The Department received the first payment from Cabading #2 on November 9, 2017.

Prior Sanctions: None.

Facility Type	Total # of Licensed Stations	Total # of Licensed Facilities in South Carolina
Tattoo Facilities	423	118

#### 7. Porkchop's Tattoo Studio (Tattoo Facility) – Florence, SC

Investigation: The Department visited Porkchop's Tattoo Studio ("Porkchop's") on August 16, 2016, to conduct a follow-up inspection.

Violations: Based upon the inspections, the Department cited Porkchop's for six (6) violations of Regulation 61-111, Standards for Licensing Tattoo Facilities. Specifically, Porkchop's was cited two (2) times for violating Section 302.D, for failing to timely submit Plans of Correction for cited violations; one (1) time for violating Section 601.D, for failing to have documentation of assigned duties and responsibilities for staff members available for review; one (1) time for violating Section 801.B.2, for failing to ensure client records documented a written explanation of client rights in accordance with the regulation; one (1) time for violating Section 900.D, for tattooing a client who indicated he or she was impaired by drugs or alcohol; and one (1) time for violating Section 900.G, for failing to obtain documentation from a physician or authorized healthcare provider that tattoo procedures were not contraindicated after clients indicated the presence of a condition that could affect the healing process.

Enforcement Action: Pursuant to the Consent Order executed October 12, 2017, the Department assessed a two thousand one hundred dollar (\$2,100) monetary penalty against Porkchop's, due within thirty (30) days of execution of the Consent Order. Additionally, Porkchop's agreed to correct the violations that initiated this enforcement action. The Department received the assessed monetary penalty from Porkchop's on October 5, 2017.

Prior Sanctions: None.

#### Bureau of EMS & Trauma

EMS Provider Type	Total # of Providers in South Carolina
EMT	7,223
Advanced EMT	490
Paramedic	4,040
Athletic Trainers	1,029
Ambulance Services Provider	281
First Responder Services Provider	2

## **8. Katrina L. Salley (EMT)**

Investigation: Katrina Salley is a certified South Carolina EMT. Ms. Salley's certification expired September 15, 2016. The Department received Ms. Salley's application for recertification on March 31, 2017. On April 6, 2017, the Department mailed Ms. Salley's certification, effective from April 6, 2017, to April 15, 2021. However, the certification was returned to the Department by the postal service as undeliverable. On April 27, 2017, a Department representative hand-delivered Ms. Salley's certification to her employer, Extreme Medical Transport of the Carolinas ("Extreme"). After delivering the certification, the Department became aware of possible regulatory violations by Ms. Salley. The Department initiated an investigation and determined Ms. Salley performed patient care within the scope of an EMT on six (6) ambulance runs from March 25, 2017, to April 4, 2017, a time in which Ms. Salley's certification was expired. The Department further determined that Ms. Salley rendered patient care without possessing her certification pocket card on thirty-eight (38) ambulance runs between April 6, 2017, and April 27, 2017, while working for Extreme or National Transport Ambulance ("National").

Violations: Ms. Salley violated S.C. Code Section 44-61-80(A) and Section 901.A of Regulation 61-7, by providing patient care within the scope of an EMT without obtaining proper certification from the Department. Additionally, Ms. Salley committed misconduct, as defined by S.C. Code Section 44-61-80(F)(17) and Section 1100(B)(17) of R.61-7, by rendering patient care without a valid pocket card in her possession, a violation of Section 901.E of R.61-7.

Enforcement Action: Pursuant to the terms of the Consent Order executed October 26, 2017, Ms. Salley agreed to the assessment of a two thousand five hundred dollar (\$2,500) monetary penalty. The Consent Order requires Ms. Salley to pay five hundred dollars (\$500) of the assessed monetary penalty within ninety (90) days of execution of the Consent Order. The remainder of the assessed monetary penalty will be held in abeyance for one (1) year following execution of the Consent Order. If at any time during the one (1) year period the Department finds Ms. Salley violated the EMS Act or Regulation 61-7, the Department may call in all or part of the assessed monetary penalty.

Prior Sanctions: None.

## **9. Todd LeJeune (EMT)**

Investigation: On May 30, 2017, the Department was notified of alleged misconduct by Mr. LeJeune. The Department initiated an investigation and found that Mr. LeJeune was careless, reckless, and irresponsible in the operation of an emergency vehicle on May 10, 2017, while working for Medshore Ambulance. Specifically, Mr. LeJeune disregarded the posted speed limit, at times exceeding eighty (80) miles per hour on rural roads. Mr. LeJeune also followed vehicles in front of him too closely and misused the emergency warning system by activating it to get around slower vehicles while he was neither traveling to a patient nor transporting a patient.

Violations: As a result of its investigation, the Department found Mr. LeJeune committed misconduct, as defined by S.C. Code Section 44-61-80(F)(11) and Section 1100(B)(11) of Regulation 61-7, by being careless, reckless, and irresponsible in the operation of an emergency vehicle.

Enforcement Action: Pursuant to the Consent Order executed October 17, 2017, Mr. LeJeune agreed to a one (1) year suspension of his EMT certificate. The suspension will be held in abeyance for one (1) year. Should Mr. LeJeune fail to comply with the EMS Act, Regulation 61-7, or the terms of the Consent Order, the Department may call in all or a portion of the agreed upon suspension. Mr. LeJeune further agreed to successfully complete a National Association of Emergency Medical Technicians Principles of Ethics and Personal Leadership course within six (6) months of execution of the Consent Order and provide proof of completion to the Department. Finally, Mr. LeJeune agreed to successfully complete a

national recognized emergency vehicle drivers training program within six (6) months of execution of the Consent Order and provide proof of completion to the Department.

Prior Sanctions: None.

**10. Stephen E. Buffkin (Paramedic)**

Summary: On July 5, 2017, the Department received notification of alleged misconduct by Mr. Buffkin. The Department initiated an investigation and found that Mr. Buffkin was addicted to drugs to such a degree to render him unfit to practice as a paramedic. Mr. Buffkin was been forthcoming in discussing his condition with the Department and has actively taken steps to rehabilitate and treat his condition.

Violations: As a result of its investigation, the Department found Mr. Buffkin committed misconduct, as defined by S.C. Code Section 44-61-80(F)(3) and Section 1100(B)(3) of Regulation 61-7, by being addicted to drugs to such a degree as to render him unfit to perform his job duties.

Enforcement Action: Pursuant to the Consent Order executed October 9, 2017, Mr. Buffkin agreed to immediately surrender his paramedic certificate to the Department. Upon receipt of Mr. Buffkin's paramedic certificate, the Department will issue Mr. Buffkin an EMT certification valid for one (1) year from execution of the Consent Order. Mr. Buffkin further agreed to enroll in, within two (2) months of execution of the Consent Order, and successfully complete an intensive outpatient program for the treatment of drug addiction. While enrolled in the program, Mr. Buffkin shall not have any positive drug test results. Mr. Buffkin agreed to successfully complete the program within one (1) year of execution of the Consent Order and provide the Department with documentation of completion. Upon completion of the program, but not less than six (6) months following execution of the Consent Order, the Department will reissue a paramedic certification to Mr. Buffkin.

Prior Sanctions: None.

SUMMARY SHEET  
BOARD OF HEALTH AND ENVIRONMENTAL CONTROL  
December 7, 2017

\_\_\_\_\_ ACTION/DECISION

X  INFORMATION

1. **TITLE:** Administrative and Consent Orders issued by Environmental Affairs.
2. **SUBJECT:** Administrative and Consent Orders issued by Environmental Quality Control (EQC) and Ocean and Coastal Resource Management (OCRM) during the period October 1, 2017 – October 31, 2017.
3. **FACTS:** For the period of October 1, 2017 through October 31, 2017, Environmental Affairs issued eighty-four (84) Consent Orders with total assessed civil penalties in the amount of \$137,994.00. No Administrative Orders were issued during the reporting period. Also, one (1) Consent Agreement was issued during the reporting period.

Bureau and Program Area	Administrative Orders	Assessed Penalties	Consent Agreements	Consent Orders	Assessed Penalties
<b>Land and Waste Management</b>					
UST Program	0	0	0	2	\$1,120.00
Aboveground Tanks	0	0	0	0	0
Solid Waste	0	0	0	3	\$3,740.00
Hazardous Waste	0	0	0	1	\$8,340.00
Infectious Waste	0	0	0	0	0
Mining	0	0	0	0	0
SUBTOTAL	0	0	0	6	\$13,200.00
<b>Water</b>					
Recreational Water	0	0	0	23	\$23,000.00
Drinking Water	0	0	0	0	0
Water Pollution	0	0	0	1	\$25,838.00
Dam Safety	0	0	1	0	0
SUBTOTAL	0	0	1	24	\$48,838.00
<b>Air Quality</b>					
SUBTOTAL	0	0	0	3	\$28,500.00
<b>Environmental Health Services</b>					
Food Safety	0	0	0	50	\$47,456.00
Onsite Wastewater	0	0	0	1	0
SUBTOTAL	0	0	0	51	\$47,456.00
<b>OCRM</b>					
SUBTOTAL	0	0	0	0	0
<b>TOTAL</b>	<b>0</b>	<b>0</b>	<b>1</b>	<b>84</b>	<b>\$137,994.00</b>

Submitted by:

Myra C. Reece  
Myra C. Reece  
Director of Environmental Affairs

**ENVIRONMENTAL AFFAIRS ENFORCEMENT REPORT  
BOARD OF HEALTH AND ENVIRONMENTAL CONTROL  
December 7, 2017**

**BUREAU OF LAND AND WASTE MANAGEMENT**

**Underground Storage Tank Enforcement**

- 1)     Order Type and Number:                     Consent Order 17-0237-UST  
       Order Date:                                 October 10, 2017  
       Individual/Entity:                         **Lowes Foods, LLC**  
       Facility:                                     Lowes Foods LLC Store 233  
       Location:                                     11871 Highway 707  
   Murrells Inlet, SC 29576  
       Mailing Address:                           1381 Old Mill Circle, Suite 200  
   Winston Salem, NC 27103-1497  
  
       County:                                     Georgetown  
       \*Previous Orders:                         None  
       Permit/ID Number:                        19470  
       Violations Cited:                        The State Underground Petroleum Environmental  
   Response Bank Act of 1988 (SUPERB Act), S.C. code Ann. § 44-2-10 et seq. (2002 and  
   Supp. 2016); and South Carolina Underground Storage Tank Control Regulation, 7 S.C.  
   Code Ann. Regs. 61-92.280.20(c)(1)(ii) (2017).

Summary: Lowes Foods, LLC (Individual/Entity), located in Murrells Inlet, South Carolina, owns and operates underground storage tanks. On August 8, 2017, the Department conducted a routine inspection and issued a Notice of Alleged Violation because there was a stick in the drop tube shutoff valve on the regular unleaded tank. The stick was removed while the Department's inspector was onsite. The Individual/Entity has violated the SUPERB Act and the South Carolina Underground Storage Tank Regulation, as follows: failed to maintain overfill prevention equipment.

Action: The Individual/Entity is required to: pay a civil penalty in the amount of one thousand dollars **(\$1,000.00)**.

- 2)     Order Type and Number:                     Consent Order 17-0284-UST  
       Order Date:                                 October 27, 2017  
       Individual/Entity:                         **Terratec, Inc.**  
       Facility:                                     Terratec, Inc.  
       Location:                                     1350 Methodist Park Road  
   West Columbia, SC 29170  
  
       Mailing Address:                           Same  
       County:                                     Lexington  
       Previous Orders:                         None  
       Permit/ID Number:                        06089  
       Violations Cited:                        The State Underground Petroleum Environmental  
   Response Bank Act of 1988 (SUPERB Act), S.C. code Ann. § 44-2-60(A) (2002 and Supp.  
   2016).

Summary: Terratec, Inc. (Individual/Entity) owns and operates an underground storage tank (UST) located in West Columbia, South Carolina. On July 1, 2017, annual tank registration fees for fiscal year 2018 were due. The Individual/Entity has violated the SUPERB Act as follows: failed to pay annual tank registration fees for fiscal year 2018.

**Action:** The Individual/Entity is required to: pay the annual tank registration fees and associated late fees in the amount of six hundred five dollars (\$605.00) and pay a civil penalty in the amount of one hundred twenty dollars **(\$120.00)**.

### **Solid Waste Enforcement**

- 3)     Order Type and Number:                     Consent Order 17-23-SW  
       Order Date:                                 October 4, 2017  
       Individual/Entity:                         **Henry and Doreander Williams and Rajah Williams**  
       Facility:                                     William's Car Care  
       Location:                                     1150 Davis Bridge Road  
   Williston, SC 29853  
       Mailing Address:                         P.O. Box 168  
   Elko, SC 29826  
       County:                                     Barnwell  
       Previous Orders:                         None  
       Permit/ID Number:                        N/A  
       Violations Cited:                        The South Carolina Solid Waste Policy and Management Act of 1991, S.C. Code Ann. 44-96-10 et seq. (2002 & Supp. 2016) and Solid Waste Management: Waste Tires, 8 S.C. Code Ann. Regs., R. 61-107.3 (2015)

**Summary:** Henry Williams, Doreander Williams and Rajah Williams (Individuals/Entities), located in Williston, South Carolina, operate a car service business. On May 20, 2016, the Department conducted an inspection in response to a complaint regarding waste tires being stored at William's Car Care. The Individuals/Entities have violated the South Carolina Solid Waste Policy and Management Act and the Solid Waste Management: Waste Tires Regulation as follows: stored greater than one hundred twenty (120) waste tires without a permit as a waste tire collection facility.

**Action:** The Individuals/Entities are required to: remove and properly dispose of the waste tires; and, pay a **stipulated penalty** in the amount of five thousand, five hundred dollars **(\$5,500.00)** should the requirements of the Order not be met.

- 4)     Order Type and Number:                     Consent Order 17-22-SW  
       Order Date:                                 October 24, 2017  
       Individual/Entity:                         **City of Columbia**  
       Facility:                                     City of Columbia Class II Landfill  
       Location:                                     Intersection of Shop Road and I-77  
   Columbia, SC 29305  
       Mailing Address:                         2910 Colonial Drive  
   Columbia, SC 29203  
       County:                                     Richland  
       Previous Orders:                         None  
       Permit/ID Number:                        401002-1201  
       Violations Cited:                        The South Carolina Solid Waste Policy and Management Act of 1991, S.C. Code Ann. 44-96-10 et seq. (2002 & Supp. 2016); the Solid Waste Management: Solid Waste Landfills and Structural Fill, 8 S.C. Code Ann. Regs., R. 61-107.19 (2012), and Permit 401002-1201.

**Summary:** The City of Columbia (Individual/Entity), located in Columbia, South Carolina,

operates a Class II Landfill. On March 14, 2016, February 21, 2017, March 9, 2017, and April 29, 2017, the Department conducted routine inspections. The Individual/Entity has violated the South Carolina Solid Waste Policy and Management Act and the Solid Waste Management: Solid Waste Landfills and Structural Fill Regulation, and the permit as follows: failed to maintain and ensure the integrity of the final cover.

**Action:** The Individual/Entity is required to: repair the final cover and, pay a civil penalty in the amount of three thousand, two hundred and forty dollars **(\$3,240.00)**.

5) Order Type and Number: Consent Order 17-26-SW  
Order Date: October 24, 2017  
Individual/Entity: **Doug Green**  
Facility: Green's New and Used Tires  
Location: 1851 Easley Highway  
Pelzer, SC 29669  
Mailing Address: Same  
County: Anderson  
Previous Orders: None  
Permit/ID Number: N/A  
Violations Cited: The South Carolina Solid Waste Policy and Management Act of 1991, S.C. Code Ann. 44-96-10 et seq. (2002 & Supp. 2016 and 8 S.C. Code Ann. Regs., R. 61-107.3 (2015) (Waste Tires)

**Summary:** Doug Green (Individual/Entity), located in Pelzer, South Carolina, operates a tire retail business. On May 16, 2017, the Department conducted an inspection in response to a complaint regarding waste tires being stored at Green's New and Used Tires. The Individual/Entity has violated the South Carolina Solid Waste Policy and Management Act and the Solid Waste Management: Waste Tire Regulation as follows: stored greater than one hundred twenty (120) waste tires without a permit as a waste tire collection facility.

**Action:** The Individual/Entity is required to: remove and properly dispose of the waste tires; pay a civil penalty in the amount of five hundred dollars **(\$500.00)**; and, pay a stipulated amount of three thousand, five hundred dollars (\$3,500.00) should the requirements of the Order not be met.

### **Hazardous Waste Enforcement**

6) Order Type and Number: Consent Order 17-24-HW  
Order Date: October 12, 2017  
Individual/Entity: **Shutterfly, Inc.**  
Facility: Shutterfly, Inc.  
Location: 1000 Shutterfly Boulevard  
Fort Mill, SC 29708  
Mailing Address: Same  
County: York  
Previous Orders: None  
Permit/ID Number: SCR 000 776 856  
Violations Cited: The South Carolina Hazardous Waste Management Act S.C. Code Ann. §44-56-130(2) et seq. (2002); The South Carolina Hazardous Waste Management Regulations, 6 and 7 S.C. Code Ann. Regs. 61-79.262.34(c)(1)(ii), R.61-79.262.90, R.61-79.262.11, R.61-79.265.174, R.61-79.273.15(c) and R.61-79.273.13(d)(1) (2012 and Supp. 2016)

Summary: Shutterfly, Inc. (Individual/Entity) operates a facility in Fort Mill, South Carolina. On May 4, 2017, the Department conducted an inspection of the facility. The Individual/Entity has violated the Hazardous Waste Management Regulations as follows: failed to mark satellite accumulation containers with the words "Hazardous Waste" or other words to mark the contents of the container; failed to clean up any hazardous waste discharge that occurs during generation or processing or storage and take such other action as may be required so that the hazardous waste discharge no longer presents a hazard to human health or the environment; failed to accurately determine if a waste is a hazardous waste; failed to inspect areas where hazardous waste containers are stored at least weekly; failed to demonstrate the length of time that the universal waste has been accumulated from the date it becomes a waste or is received; and, failed to contain any lamp in containers or packages that are structurally sound, adequate to prevent breakage, and compatible with the contents of the lamps. Such containers must remain closed and must lack evidence of leakage, spillage or damage that could cause leakage under reasonably foreseeable conditions.

Action: The Individual/Entity is required to: pay a civil penalty in the amount of eight thousand, three hundred forty dollars (**\$8,340.00**).

## **BUREAU OF WATER**

### **Recreational Water Enforcement**

7)	<u>Order Type and Number:</u>	Consent Order 17-127-RW
	<u>Order Date:</u>	October 2, 2017
	<u>Individual/Entity:</u>	<b>Upstate Campus Edge, LLC &amp; Upstate Country Manor Holdings, LLC</b>
	<u>Facility:</u>	Campus Edge Apartments
	<u>Location:</u>	1000 Pinegate Drive Spartanburg, SC 29303
	<u>Mailing Address:</u>	Same
	<u>County:</u>	Spartanburg
	<u>Previous Orders:</u>	None
	<u>Permit/ID Number:</u>	42-112-1
	<u>Violations Cited:</u>	S.C. Code Ann. Regs. 61-51(J)

Summary: Upstate Campus Edge, LLC & Upstate Country Manor Holdings, LLC (Individual/Entity) owns and is responsible for the proper operation and maintenance of a pool. On May 22, 2017, and August 15, 2017, the pool was inspected and a violation was issued for failure to properly operate and maintain. The Individual/Entity has violated the Public Swimming Pools Regulation as follows: a skimmer was missing a weir; the bathroom did not have toilet paper, soap, or paper towels; the foot rinse shower was not operating properly; the emergency notification device was not operational; the pool rules sign was not completely filled out; the current pool operator of record information was not posted to the public; the drinking water fountain was not operating properly; the chlorine level was not within the acceptable range of water quality standards; and the facility address was not posted at the emergency notification device.

Action: The Individual/Entity is required to: submit a corrective action plan and schedule of implementation to address the deficiencies; and pay a civil penalty in the amount of six hundred eighty dollars (**\$680.00**). The civil penalty has been paid. The Individual/Entity submitted a corrective action plan and corrected the deficiencies.

8)	<u>Order Type and Number:</u> <u>Order Date:</u> <u>Individual/Entity:</u> <u>Facility:</u> <u>Location:</u>  <u>Mailing Address:</u> <u>County:</u> <u>Previous Orders:</u> <u>Permit/ID Number:</u> <u>Violations Cited:</u>	Consent Order 17-129-RW October 2, 2017 <b>Blue Sky Hospitality, LLC</b> Best Western 1808 West Lucas Street Florence, SC 29501  Same Florence None 21-120-1 S.C. Code Ann. Regs. 61-51(J)
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Summary: Blue Sky Hospitality, LLC (Individual/Entity) owns and is responsible for the proper operation and maintenance of a pool. On June 6, 2017, and July 10, 2017, the pool was inspected and a violation was issued for failure to properly operate and maintain. The Individual/Entity has violated the Public Swimming Pools Regulation as follows: the pool furniture was not at least four feet from the pool edge; the pH level was not within the acceptable range of water quality standards; both of the "Shallow Water – No Diving Allowed" signs did not have the correct sized lettering; only one "No Lifeguard On Duty – Swim At Your Own Risk" sign was posted and the sign posted did not have the correct sized lettering; the log book was not maintained on a daily basis; and the log book was not maintained a minimum of three times per week by the pool operator of record.

Action: The Individual/Entity is required to: submit a corrective action plan and schedule of implementation to address the deficiencies; and pay a civil penalty in the amount of six hundred eighty dollars (**\$680.00**). The civil penalty has been paid. The Individual/Entity submitted a corrective action plan and corrected the deficiencies.

9)	<u>Order Type and Number:</u> <u>Order Date:</u> <u>Individual/Entity:</u> <u>Facility:</u> <u>Location:</u>  <u>Mailing Address:</u>  <u>County:</u> <u>Previous Orders:</u> <u>Permit/ID Number:</u> <u>Violations Cited:</u>	Consent Order 17-128-RW October 4, 2017 <b>Forest Oaks Apartments (SC) Owner, LLC</b> Forest Oaks Apartments 1808 Heckle Boulevard Rock Hill, SC 29732  1878 Gingercake Circle Rock Hill, SC 29732  York None 46-159-1 S.C. Code Ann. Regs. 61-51(J)
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Summary: Forest Oaks Apartments (SC) Owner, LLC (Individual/Entity) owns and is responsible for the proper operation and maintenance of a pool. On June 27, 2017, and August 1, 2017, the pool was inspected and a violation was issued for failure to properly operate and maintain. The Individual/Entity has violated the Public Swimming Pools Regulation as follows: a handrail was missing a bolt cover; a skimmer was missing a weir, and some of the skimmer lids were missing or cracked; the foot rinse shower by the pump room was not operating properly; chemicals were stored in the pump room; the gate did not self-close and latch; the cyanuric acid level was above the water quality standards acceptable limit; a grab handle on one of the life rings was broken, and the life ring rope was frayed and too short on the other life ring; the shepherd's crook was missing a bolt; there were no "Shallow Water – No Diving Allowed" signs posted; there were no "No Lifeguard On Duty – Swim At Your Own Risk" signs posted; the bound and numbered

log book was not being maintained on a daily basis; and the cyanuric acid levels were not being recorded weekly in the bound and numbered log book.

Action: The Individual/Entity is required to: submit a corrective action plan and schedule of implementation to address the deficiencies; and pay a civil penalty in the amount of six hundred eighty dollars (**\$680.00**). The civil penalty has been paid.

10) <u>Order Type and Number:</u>	Consent Order 17-130-RW
<u>Order Date:</u>	October 4, 2017
<u>Individual/Entity:</u>	<b>Solera, LLC</b>
<u>Facility:</u>	Days Inn
<u>Location:</u>	400 Buff Boulevard Summerton, SC 29148
<u>Mailing Address:</u>	Same
<u>County:</u>	Clarendon
<u>Previous Orders:</u>	None
<u>Permit/ID Number:</u>	14-025-1
<u>Violations Cited:</u>	S.C. Code Ann. Regs. 61-51(J)

Summary: Solera, LLC (Individual/Entity) owns and is responsible for the proper operation and maintenance of a pool. On June 28, 2017, the pool was inspected and a violation was issued for failure to properly operate and maintain. The Individual/Entity has violated the Public Swimming Pools Regulation as follows: the pool furniture was not at least four feet from the edge of the pool; the gate did not self-close and latch; the bound and numbered log book was not maintained on a daily basis; the chlorine and pH levels were not within the acceptable range of water quality standards; the life ring had deteriorated and did not have a permanently attached rope; the pool rules sign was not completely filled out; the disinfection equipment was not operating properly; and only one "Shallow Water - No Diving Allowed" sign was posted.

Action: The Individual/Entity is required to: submit a corrective action plan and schedule of implementation to address the deficiencies; and pay a civil penalty in the amount of three hundred forty dollars (**\$340.00**).

11) <u>Order Type and Number:</u>	Consent Order 17-131-RW
<u>Order Date:</u>	October 4, 2017
<u>Individual/Entity:</u>	<b>RAS, LLC</b>
<u>Facility:</u>	Sun Fun Motel
<u>Location:</u>	2305 Withers Drive Myrtle Beach, SC 29577
<u>Mailing Address:</u>	Same
<u>County:</u>	Horry
<u>Previous Orders:</u>	None
<u>Permit/ID Number:</u>	26-110-1
<u>Violations Cited:</u>	S.C. Code Ann. Regs. 61-51(J)

Summary: RAS, LLC (Individual/Entity) owns and is responsible for the proper operation and maintenance of a pool. On May 30, 2017, and June 22, 2017, the pool was inspected and a violation was issued for failure to properly operate and maintain. The Individual/Entity has violated the Public Swimming Pools Regulation as follows: a ladder was missing bumpers; there was no drinking water fountain; the chlorine level was not within the acceptable range of water quality standards; the lifeline floats were not properly spaced; the deck was not clean and clear of hazards; the pool furniture was not at least four feet from the pool edge; the gate did not self-close and

latch; the main drain grates were not in place; and the facility address was not posted at the emergency notification device.

Action: The Individual/Entity is required to: submit a corrective action plan and schedule of implementation to address the deficiencies; and pay a civil penalty in the amount of six hundred eighty dollars (**\$680.00**).

12)	<u>Order Type and Number:</u>	Consent Order 17-132-RW
	<u>Order Date:</u>	October 6, 2017
	<u>Individual/Entity:</u>	<b>Timberlake Country Club, Inc.</b>
	<u>Facility:</u>	Timberlake Country Club
	<u>Location:</u>	222 Timberlake Drive Chapin, SC 29036
	<u>Mailing Address:</u>	Same
	<u>County:</u>	Lexington
	<u>Previous Orders:</u>	None
	<u>Permit/ID Number:</u>	32-1084B
	<u>Violations Cited:</u>	S.C. Code Ann. Regs. 61-51(J)

Summary: Timberlake Country Club, Inc. (Individual/Entity) owns and is responsible for the proper operation and maintenance of a pool. On July 6, 2017, and August 7, 2017, the pool was inspected and a violation was issued for failure to properly operate and maintain. The Individual/Entity has violated the Public Swimming Pools Regulation as follows: a ladder was not tight and secure; the pool floor and walls were dirty and had algae on them; the pool floor was cracked and the deck was chipped; skimmers were missing weirs; a skimmer cover was broken; the flow meter was not operating; the cyanuric acid level was not monitored weekly; the water level was too high; a gate did not self-close and latch; the pH level was not within the acceptable range of water quality standards; the life ring was deteriorated; and the life ring rope was not the appropriate length.

Action: The Individual/Entity is required to: submit a corrective action plan and schedule of implementation to address the deficiencies; and pay a civil penalty in the amount of six hundred eighty dollars (**\$680.00**).

13)	<u>Order Type and Number:</u>	Consent Order 17-133-RW
	<u>Order Date:</u>	October 6, 2017
	<u>Individual/Entity:</u>	<b>2600 North Homeowners' Association, Inc.</b>
	<u>Facility:</u>	Anderson Ocean Club
	<u>Location:</u>	2600 North Ocean Boulevard Myrtle Beach, SC 29577
	<u>Mailing Address:</u>	1000 Second Avenue South, Suite 310 North Myrtle Beach, SC 29582
	<u>County:</u>	Horry
	<u>Previous Orders:</u>	None
	<u>Permit/ID Number:</u>	26-1612B, 26-1613B, 26-1614B
	<u>Violations Cited:</u>	S.C. Code Ann. Regs. 61-51(J)

Summary: 2600 North Homeowners' Association, Inc. (Individual/Entity) owns and is responsible for the proper operation and maintenance of three pools. On May 25, 2017, and June 19, 2017, the pools were inspected and violations were issued for failure to properly operate and maintain. The Individual/Entity has violated the Public Swimming Pools Regulation as follows: the pool entry door did not self-close and latch; the gate did not self-close and latch; the chlorine level was not within the acceptable range of water quality standards; the pool rules sign was not

completely filled out; only one "Shallow Water – No Diving Allowed" sign was posted; and the current pool operator of record information was not posted to the public.

Action: The Individual/Entity is required to: submit a corrective action plan and schedule of implementation to address the deficiencies; and pay a civil penalty in the amount of two thousand, forty dollars **(\$2,040.00)**.

14)	<u>Order Type and Number:</u>	Consent Order 17-134-RW
	<u>Order Date:</u>	October 9, 2017
	<u>Individual/Entity:</u>	<b>TCT, Inc.</b>
	<u>Facility:</u>	Town & Country Inn
	<u>Location:</u>	2008 Savannah Highway Charleston, SC 29407
	<u>Mailing Address:</u>	Same
	<u>County:</u>	Charleston
	<u>Previous Orders:</u>	None
	<u>Permit/ID Number:</u>	10-237-1
	<u>Violations Cited:</u>	S.C. Code Ann. Regs. 61-51(J)

Summary: TCT, Inc. (Individual/Entity) owns and is responsible for the proper operation and maintenance of a pool. On June 5, 2017, and July 19, 2017, the pool was inspected and a violation was issued for failure to properly operate and maintain. The Individual/Entity has violated the Public Swimming Pools Regulation as follows: the chlorine and pH levels were not within the acceptable range of water quality standards; the shepherd's crook was not the approved length; and the bound and numbered log book was not available for review.

Action: The Individual/Entity is required to: submit a corrective action plan and schedule of implementation to address the deficiencies; and pay a civil penalty in the amount of six hundred eighty dollars **(\$680.00)**.

15)	<u>Order Type and Number:</u>	Consent Order 17-135-RW
	<u>Order Date:</u>	October 9, 2017
	<u>Individual/Entity:</u>	<b>MAS Broken Arrow Apartments, Limited Partnership</b>
	<u>Facility:</u>	Heron Lake Apartment Homes
	<u>Location:</u>	1340 North Brickyard Road Columbia, SC 29223
	<u>Mailing Address:</u>	Same
	<u>County:</u>	Richland
	<u>Previous Orders:</u>	None
	<u>Permit/ID Number:</u>	40-1093B
	<u>Violations Cited:</u>	S.C. Code Ann. Regs. 61-51(J)

Summary: MAS Broken Arrow Apartments, Limited Partnership (Individual/Entity) owns and is responsible for the proper operation and maintenance of a pool. On June 1, 2017, and July 17, 2017, the pool was inspected and a violation was issued for failure to properly operate and maintain. The Individual/Entity has violated the Public Swimming Pools Regulation as follows: a ladder was missing bumpers; a skimmer was missing a weir; the drinking water fountain was not operating properly; the foot rinse shower was not operating properly; the chlorine level was not within the acceptable range of water quality standards; the life ring was deteriorated, and the life ring rope was not the appropriate length; there was algae on the pool walls and floor; a gate did not self-close and latch; the shepherd's crook was missing a bolt and was not the approved length;

the cyanuric acid level was not being recorded weekly in the bound and numbered log book; and the bound and numbered log book was not maintained on a daily basis.

Action: The Individual/Entity is required to: submit a corrective action plan and schedule of implementation to address the deficiencies; and pay a civil penalty in the amount of six hundred eighty dollars (**\$680.00**).

16) <u>Order Type and Number:</u>	Consent Order 17-136-RW
<u>Order Date:</u>	October 9, 2017
<u>Individual/Entity:</u>	<b>Woodhill Place Association, Inc.</b>
<u>Facility:</u>	Woodhill Place
<u>Location:</u>	6220 Rolling Fork Road Charleston, SC 29406
<u>Mailing Address:</u>	4925 Lacross Road, Suite 112 North Charleston, SC 29406
<u>County:</u>	Charleston
<u>Previous Orders:</u>	None
<u>Permit/ID Number:</u>	10-279-1
<u>Violations Cited:</u>	S.C. Code Ann. Regs. 61-51(J)

Summary: Woodhill Place Association, Inc. (Individual/Entity) owns and is responsible for the proper operation and maintenance of a pool. On June 27, 2017, and July 19, 2017, the pool was inspected and a violation was issued for failure to properly operate and maintain. The Individual/Entity has violated the Public Swimming Pools Regulation as follows: the lifeline floats were not properly spaced; the depth marker tiles were loose; there was algae on the walls and floor of the pool; the water level was too low; the bathroom did not have soap; there was no drinking water fountain; there were chemicals spilled in the pump room; the chlorine level was not within the acceptable range of water quality standards; the life ring was deteriorated; the cyanuric acid levels were not being recorded weekly in the bound and numbered log book; and the bound and numbered log book was not maintained on a daily basis.

Action: The Individual/Entity is required to: submit a corrective action plan and schedule of implementation to address the deficiencies; and pay a civil penalty in the amount of six hundred eighty dollars (**\$680.00**).

17) <u>Order Type and Number:</u>	Consent Order 17-137-RW
<u>Order Date:</u>	October 10, 2017
<u>Individual/Entity:</u>	<b>The Club at Cobblestone, LLC</b>
<u>Facility:</u>	Cobblestone Park
<u>Location:</u>	1298 University Parkway Blythewood, SC 29016
<u>Mailing Address:</u>	Same
<u>County:</u>	Richland
<u>Previous Orders:</u>	None
<u>Permit/ID Number:</u>	40-1074B, 40-1079C, & 40-1073D
<u>Violations Cited:</u>	S.C. Code Ann. Regs. 61-51(J)

Summary: The Club at Cobblestone, LLC (Individual/Entity) owns and is responsible for the proper operation and maintenance of a pool, a kiddie pool, and a spa. On May 31, 2017, and July 12, 2017, the pool, kiddie pool, and spa were inspected and a violation was issued for failure to properly operate and maintain. The Individual/Entity has violated the Public Swimming Pools Regulation as follows: a handrail was not tight and secure; there was debris in the skimmer baskets; the pool furniture was not at least four feet from the edge of the pool; the chlorine and pH levels

were not within the acceptable range of water quality standards; the life ring was deteriorated; the facility address was not posted at the emergency notification device; the spa temperature was not posted to the public; the bound and numbered log book was not maintained on a daily basis, and was not maintained a minimum of three times a week by the pool operator of record; and the bound and numbered log book was not available for review.

Action: The Individual/Entity is required to: submit a corrective action plan and schedule of implementation to address the deficiencies; and pay a civil penalty in the amount of two thousand, forty dollars **(\$2,040.00)**.

18)	<u>Order Type and Number:</u>	Consent Order 17-138-RW
	<u>Order Date:</u>	October 10, 2017
	<u>Individual/Entity:</u>	<b>River's Edge Retreat, Inc.</b>
	<u>Facility:</u>	River's Edge Retreat
	<u>Location:</u>	1019 Garden Valley Lane Columbia, SC 29210
	<u>Mailing Address:</u>	Same
	<u>County:</u>	Lexington
	<u>Previous Orders:</u>	None
	<u>Permit/ID Number:</u>	32-033-1
	<u>Violations Cited:</u>	S.C. Code Ann. Regs. 61-51(J)

Summary: River's Edge Retreat, Inc. (Individual/Entity) owns and is responsible for the proper operation and maintenance of a pool. On June 28, 2017, and July 14, 2017, the pool was inspected and a violation was issued for failure to properly operate and maintain. The Individual/Entity has violated the Public Swimming Pools Regulation as follows: the lifeline was not attached to the pool wall, did not have the minimum number of required floats, and was deteriorated; a ladder was not tight and secure and was missing a rung; the pool walls and floor were not clean; tiles were missing on the pool wall; the deck was uneven with sharp edges; a skimmer was missing a weir; two skimmer baskets were missing; the drinking water fountain was not operating properly; the gate did not self-close and latch; a section of the perimeter fencing had openings greater than four inches; the chlorine level was not within the acceptable range of water quality standards; there were chlorine sticks in a skimmer basket; and the shepherd's crook was not clear of obstructions.

Action: The Individual/Entity is required to: submit a corrective action plan and schedule of implementation to address the deficiencies; and pay a civil penalty in the amount of five hundred sixty dollars **(\$560.00)**.

19)	<u>Order Type and Number:</u>	Consent Order 17-140-RW
	<u>Order Date:</u>	October 20, 2017
	<u>Individual/Entity:</u>	<b>A &amp; B Associates, L.P.</b>
	<u>Facility:</u>	August on Southside
	<u>Location:</u>	2208 Southside Boulevard Port Royal, SC 29935
	<u>Mailing Address:</u>	Same
	<u>County:</u>	Beaufort
	<u>Previous Orders:</u>	None
	<u>Permit/ID Number:</u>	07-101-1
	<u>Violations Cited:</u>	S.C. Code Ann. Regs. 61-51(J)

Summary: A & B Associates, L.P. (Individual/Entity) owns and is responsible for the proper operation and maintenance of a pool. On June 26, 2017, and July 13, 2017, the pool was inspected and a violation was issued for failure to properly operate and maintain. The Individual/Entity has

violated the Public Swimming Pools Regulation as follows: the lifeline floats were damaged; the lifeline was not attached to the pool wall; a ladder was missing a rung; the drinking water fountain and foot rinse shower were not operating properly; the gate did not self-close and latch; and the bound and numbered log book was not available for review.

Action: The Individual/Entity is required to: submit a corrective action plan and schedule of implementation to address the deficiencies; and pay a civil penalty in the amount of six hundred eighty dollars (**\$680.00**).

20) Order Type and Number: Consent Order 17-139-RW  
Order Date: October 23, 2017  
Individual/Entity: **SouthPointe Co-Owners Association, Inc.**  
Facility: SouthPointe  
Location: 1 King Cotton Road  
Edisto Beach, SC 29438  
Mailing Address: Same  
County: Colleton  
Previous Orders: None  
Permit/ID Number: 15-033-1  
Violations Cited: S.C. Code Ann. Regs. 61-51(J)

Summary: SouthPointe Co-Owners Association, Inc. (Individual/Entity) owns and is responsible for the proper operation and maintenance of a pool. On June 15, 2017, and July 12, 2017, the pool was inspected and a violation was issued for failure to properly operate and maintain. The Individual/Entity has violated the Public Swimming Pools Regulation as follows: a ladder was missing bumpers; a skimmer was missing a weir; the chlorine level was not within the acceptable range of water quality standards; the life ring was deteriorated; and the pool rules sign was not completely filled out.

Action: The Individual/Entity is required to: submit a corrective action plan and schedule of implementation to address the deficiencies; and pay a civil penalty in the amount of six hundred eighty dollars (**\$680.00**).

21) Order Type and Number: Consent Order 17-141-RW  
Order Date: October 24, 2017  
Individual/Entity: **WMJ, LLC**  
Facility: Sea Dip Motel  
Location: 2608 North Ocean Boulevard  
Myrtle Beach, SC 29577  
Mailing Address: Same  
County: Horry  
Previous Orders: None  
Permit/ID Number: 26-D97-1  
Violations Cited: S.C. Code Ann. Regs. 61-51(J)

Summary: WMJ, LLC (Individual/Entity) owns and is responsible for the proper operation and maintenance of a spa. On May 25, 2017, June 16, 2017, and July 24, 2017, the spa was inspected and a violation was issued for failure to properly operate and maintain. The Individual/Entity has violated the Public Swimming Pools Regulation as follows: there was no drinking water fountain; the chlorine and pH levels were not within the acceptable range of water quality standards; the spa temperature was above 104 degrees Fahrenheit; and the bound and numbered log book was not maintained on a daily basis. On August 7, 2017, a follow-up inspection was conducted and it was determined that all of the deficiencies had been addressed.

Action: The Individual/Entity is required to: pay a civil penalty in the amount of two thousand, forty dollars **(\$2,040.00)**. The civil penalty has been paid.

22) Order Type and Number: Consent Order 17-142-RW  
Order Date: October 24, 2017  
Individual/Entity: **Ocean Side Villas Owners Association, Inc.**  
Facility: Ocean Side Villas  
Location: 307 Flagg Street  
Myrtle Beach, SC 29577  
Mailing Address: Same  
County: Horry  
Previous Orders: None  
Permit/ID Number: 26-081-1  
Violations Cited: S.C. Code Ann. Regs. 61-51(J) & 61-51(K)(1)(c)

Summary: Ocean Side Villas Owners Association, Inc. (Individual/Entity) owns and is responsible for the proper operation and maintenance of a pool. On June 5, 2017, and July 10, 2017, the pool was inspected and a violation was issued for failure to properly operate and maintain; and on July 11, 2017, the pool was inspected and a violation was issued for failure to properly operate and maintain and for re-opening prior to receiving Department approval. The Individual/Entity has violated the Public Swimming Pools Regulation as follows: the lifeline floats were not properly spaced; there was no drinking water fountain; the gate did not self-close and latch; the chlorine level was not within the acceptable range of water quality standards; the life ring did not have a permanently attached rope; the facility address was not posted at the emergency notification device; the pool rules sign was not completely filled out; the current pool operator of record information was not posted to the public; the facility could not produce current valid documentation of pool operator certification; the emergency notification device was not operating properly; the bound and numbered log book was not available for review; and the pool was operating prior to receiving Department approval.

Action: The Individual/Entity is required to: submit a corrective action plan and schedule of implementation to address the deficiencies; and pay a civil penalty in the amount of two thousand, three hundred eighty dollars **(\$2,380.00)**. The civil penalty has been paid.

23) Order Type and Number: Consent Order 17-143-RW  
Order Date: October 24, 2017  
Individual/Entity: **Blue Heron HPR, Council of Co-Owners, Inc.**  
Facility: Blue Heron  
Location: 4999 Highway 17  
Murrells Inlet, SC 29576  
Mailing Address: Same  
County: Georgetown  
Previous Orders: None  
Permit/ID Number: 22-050-1  
Violations Cited: S.C. Code Ann. Regs. 61-51(J)

Summary: Blue Heron HPR, Council of Co-Owners, Inc. (Individual/Entity) owns and is responsible for the proper operation and maintenance of a pool. On June 5, 2017, June 28, 2017, and July 27, 2017, the pool was inspected and a violation was issued for failure to properly operate and maintain. The Individual/Entity has violated the Public Swimming Pools Regulation as follows: the deck was not clean and clear of hazards; the pool furniture was not at least four feet from the

pool edge; the chlorine and pH levels were not within the acceptable range of water quality standards; the facility address was not posted at the emergency notification device; the bound and numbered log book was not maintained on a daily basis; a skimmer was missing a weir; the gate did not self-close and latch; and the life ring was deteriorated.

Action: The Individual/Entity is required to: submit a corrective action plan and schedule of implementation to address the deficiencies; and pay a civil penalty in the amount of two thousand, forty dollars **(\$2,040.00)**.

24)	<u>Order Type and Number:</u>	Consent Order 17-144-RW
	<u>Order Date:</u>	October 24, 2017
	<u>Individual/Entity:</u>	<b>J&amp;M Hospitality, Inc.</b>
	<u>Facility:</u>	Super 8
	<u>Location:</u>	1591 Highway 17 North Myrtle Beach, SC 29582
	<u>Mailing Address:</u>	Same
	<u>County:</u>	Horry
	<u>Previous Orders:</u>	16-123-RW (\$680.00)
	<u>Permit/ID Number:</u>	26-L25-1
	<u>Violations Cited:</u>	S.C. Code Ann. Regs. 61-51(J)

Summary: J&M Hospitality, Inc. (Individual/Entity) owns and is responsible for the proper operation and maintenance of a pool. On June 7, 2017, and June 19, 2017, the pool was inspected and a violation was issued for failure to properly operate and maintain. The Individual/Entity has violated the Public Swimming Pools Regulation as follows: a ladder was missing bumpers; the pool furniture was not at least four feet from the pool edge; the chlorine level was not within the acceptable range of water quality standards; and the facility address was not posted at the emergency notification device. On July 28, 2017, a follow-up inspection was conducted and it was determined that all of the deficiencies had been addressed.

Action: The Individual/Entity is required to: pay a civil penalty in the amount of one thousand, three hundred sixty dollars **(\$1,360.00)**. The civil penalty has been paid.

25)	<u>Order Type and Number:</u>	Consent Order 17-145-RW
	<u>Order Date:</u>	October 24, 2017
	<u>Individual/Entity:</u>	<b>Sedgefield at North Myrtle Beach Homeowner's Association, Inc.</b>
	<u>Facility:</u>	The Sedgefield
	<u>Location:</u>	5910 North Ocean Boulevard North Myrtle Beach, SC 29582
	<u>Mailing Address:</u>	Same
	<u>County:</u>	Horry
	<u>Previous Orders:</u>	None
	<u>Permit/ID Number:</u>	26-810-1
	<u>Violations Cited:</u>	S.C. Code Ann. Regs. 61-51(J)

Summary: Sedgefield at North Myrtle Beach Homeowner's Association, Inc. (Individual/Entity) owns and is responsible for the proper operation and maintenance of a pool. On June 12, 2017, and June 22, 2017, the pool was inspected and a violation was issued for failure to properly operate and maintain. The Individual/Entity has violated the Public Swimming Pools Regulation as follows: the lifeline floats were not properly spaced; a bolt cover was deteriorated; the pH level was not within the acceptable range of water quality standards; the bound and numbered log book was not maintained on a daily basis; and the gate did not self-close and latch.

On July 15, 2017, a follow-up inspection was conducted and it was determined that all of the deficiencies had been addressed.

Action: The Individual/Entity is required to: pay a civil penalty in the amount of six hundred eighty dollars (**\$680.00**). The civil penalty has been paid.

26) Order Type and Number: Consent Order 17-146-RW  
Order Date: October 24, 2017  
Individual/Entity: **Sea Marsh I Homeowners Association, Inc.**  
Facility: Sea Marsh Condos  
Location: 6200 North Ocean Boulevard  
North Myrtle Beach, SC 29582  
Mailing Address: Same  
County: Horry  
Previous Orders: None  
Permit/ID Number: 26-874-1  
Violations Cited: S.C. Code Ann. Regs. 61-51(J)

Summary: Sea Marsh I Homeowners Association, Inc. (Individual/Entity) owns and is responsible for the proper operation and maintenance of a pool. On May 30, 2017, and June 20, 2017, the pool was inspected and a violation was issued for failure to properly operate and maintain. The Individual/Entity has violated the Public Swimming Pools Regulation as follows: the lifeline floats were not properly spaced; a bolt cover was deteriorated; the drinking water fountain and foot rinse shower were not operating; the chlorine and pH levels were not within the acceptable range of water quality standards; the bound and numbered log book was not maintained on a daily basis; and a ladder was not tight and secure. On July 14, 2017, a follow-up inspection was conducted and it was determined that all of the deficiencies had been addressed.

Action: The Individual/Entity is required to: pay a civil penalty in the amount of six hundred eighty dollars (**\$680.00**). The civil penalty has been paid.

27) Order Type and Number: Consent Order 17-147-RW  
Order Date: October 24, 2017  
Individual/Entity: **Nishant Enterprises Associates, L.L.C.**  
Facility: Quality Inn  
Location: 315 North Duncan By-Pass  
Union, SC 29379  
Mailing Address: Same  
County: Union  
Previous Orders: None  
Permit/ID Number: 44-013-1  
Violations Cited: S.C. Code Ann. Regs. 61-51(J)

Summary: Nishant Enterprises Associates, L.L.C. (Individual/Entity) owns and is responsible for the proper operation and maintenance of a pool. On June 1, 2017, and July 6, 2017, the pool was inspected and a violation was issued for failure to properly operate and maintain. The Individual/Entity has violated the Public Swimming Pools Regulation as follows: there were chlorine sticks in the skimmer baskets; the chlorine and pH levels were not within the acceptable range of water quality standards; the cyanuric acid level was above the water quality standards acceptable limit; the pool rules sign was not legible; and the current pool operator of record information was not posted to the public.

Action: The Individual/Entity is required to: submit a corrective action plan and schedule of implementation to address the deficiencies; and pay a civil penalty in the amount of six hundred eighty dollars (**\$680.00**).

28) Order Type and Number: Consent Order 17-148-RW  
Order Date: October 24, 2017  
Individual/Entity: **Mid-America Apartment Communities, Inc.**  
Facility: Hampton Pointe Apartments  
Location: 1916 Sam Rittenburg Boulevard  
Charleston, SC 29407  
Mailing Address: 3590 Mary Ader Avenue  
Charleston, SC 29414  
County: Charleston  
Previous Orders: None  
Permit/ID Number: 10-361-1  
Violations Cited: S.C. Code Ann. Regs. 61-51(J)

Summary: Mid-America Apartment Communities, Inc. (Individual/Entity) owns and is responsible for the proper operation and maintenance of a pool. On June 8, 2017, and July 17, 2017, the pool was inspected and a violation was issued for failure to properly operate and maintain. The Individual/Entity has violated the Public Swimming Pools Regulation as follows: a handrail was not tight and secure; the pool floor was not clean; the chlorine level was not within the acceptable range of water quality standards; the facility address was not posted at the emergency notification device; and the life ring did not have a permanently attached rope.

Action: The Individual/Entity is required to: submit a corrective action plan and schedule of implementation to address the deficiencies; and pay a civil penalty in the amount of six hundred eighty dollars (**\$680.00**).

29) Order Type and Number: Consent Order 17-149-RW  
Order Date: October 25, 2017  
Individual/Entity: **Heron Cove Property Owners Association, Inc.**  
Facility: Heron Cove Subdivision  
Location: 6814 Pine Moss Lane  
Clover, SC 29710  
Mailing Address: Same  
County: York  
Previous Orders: None  
Permit/ID Number: 46-1098B  
Violations Cited: S.C. Code Ann. Regs. 61-51(J)

Summary: Heron Cove Property Owners Association, Inc. (Individual/Entity) owns and is responsible for the proper operation and maintenance of a pool. On June 9, 2017, and July 19, 2017, the pool was inspected and a violation was issued for failure to properly operate and maintain. The Individual/Entity has violated the Public Swimming Pools Regulation as follows: a skimmer was missing a weir; a bathroom did not have soap; the drinking water fountain was not operating properly; the flow meter was not operating; the gate did not self-close and latch; the pool rules sign was not completely filled out; a ladder was not tight and secure; there was debris in the skimmer baskets; chemicals were stored in the equipment room; there was a leaking pipe in the equipment room; and the bound and numbered log book was not maintained on a daily basis.

Action: The Individual/Entity is required to: submit a corrective action plan and schedule of implementation to address the deficiencies; and pay a civil penalty in the amount of six hundred eighty dollars (**\$680.00**).

### **Water Pollution Enforcement**

30) Order Type and Number: Consent Order 17-074-W  
Order Date: October 17, 2017  
Individual/Entity: **Charles Satterfield**  
Facility: Lyman Farms at Shiloh Subdivision  
Location: Shiloh Church Road  
Spartanburg, South Carolina  
Mailing Address: P.O. Box 1230  
Greer, SC 29652  
County: Spartanburg  
Previous Orders: None  
Permit/ID Number: SCR10H001  
Violations Cited: 3 S.C. Code Ann. Regs. 61-9.122.41(a) and  
(e)(1) (2011) and S.C. Code Ann. § 48-1-110(d) and § 48-1-90(A)(1) (Supp. 2015)

Summary: Charles Satterfield (Individual/Entity) is responsible for the development of the Lyman Farms at Shiloh Subdivision, located in Spartanburg County, South Carolina. On April 13, 2016, May 12, 2016, July 19, 2016, and November 3, 2016, the Department forwarded inspection reports to the Individual/Entity, notifying of the deficiencies and unsatisfactory conditions. The Individual/Entity has violated the Pollution Control Act and Water Pollution Control Permits Regulation as follows: failed to properly install, operate and maintain all stormwater, sediment and erosion control devices as required by its National Pollutant Discharge Elimination System (NPDES) General Permit for Storm Water Discharges from Construction Activities, and allowed sediment to discharge into the environment, including the waters of the state, in a manner other than in compliance with its NPDES permit.

Action: The Individual/Entity is required to: submit a report, completed by a South Carolina Registered Professional Engineer, certifying that all stormwater and sediment control devices are installed and functioning properly; monitor and maintain all Best Management Practices (BMPs) required to prevent further discharge of sediment from the Site until development of the Site is completed; and, pay a civil penalty in the amount of twenty-five thousand, eight hundred thirty-eight dollars (**\$25,838.00**).

### **Dams Enforcement**

31) Order Type and Number: Consent Agreement 17-073-W  
Order Date: October 17, 2017  
Individual/Entity: **Lake Dogwood Property Owners Association**  
Facility: Murray Pond/Lake Dogwood Dam  
Location: Approximately one and one-half (1.5) miles south from the intersection of Leesburg Road and Hwy. 601  
Mailing Address: 117 Lake Dogwood Circle South  
Eastover, SC 29044  
County: Richland

Previous Orders: 2015 Emergency Order  
Permit/ID Number: D 0595  
Law Citations: SC Dams and Reservoirs Safety Act, S.C. Code Ann. § 49-11-110, *et seq.*, (2008) and Dams and Reservoirs Safety Act Regulation 72.1, *et seq.* (2012)

Summary: Lake Dogwood Property Owners Association (Individual/Entity) owns and is responsible for the proper operation and maintenance of the Murray Pond/Lake Dogwood Dam in Richland County, South Carolina. On October 15 2015, the Department issued an Emergency Order to the Individual/Entity as a result of unsafe conditions at the dam. The Agreement is entered into by the Department and the Individual/Entity with respect to remedial actions addressing deficiencies in the condition of the dam.

Action: The Individual/Entity is required to: maintain the Dam in a condition that does not impound water until the Dam is repaired or removed from the property; notify the Department upon any change in status, ownership, or condition of the Dam; apply for a permit prior to performing any changes to the Dam; and, obtain a permit under the "Construction Permit Application Requirements" in section 72-3.D.2, if plans are made to repair the Dam after a period of two (2) years from the execution date of the Order.

#### **BUREAU OF AIR QUALITY**

32) Order Type and Number: Consent Order 17-033-A  
Order Date: October 19, 2017  
Individual/Entity: **Giant Cement Company**  
Facility: Giant Cement Company  
Location: 654 Judge Street  
Harleyville, SC 29448  
Mailing Address: P.O. Box 218  
Harleyville, SC 29448  
County: Dorchester  
Previous Orders: None  
Permit/ID Number: 0900-0002  
Violations Cited: U.S. EPA 40 CFR 63, 5 S.C. Code Ann. Regs. 61-62.63, Subpart EEE, and 5 S.C. Code Ann. Regs. 61-62.1, Section II, Permit Requirements

Summary: Giant Cement Company (Individual/Entity), is a Portland cement manufacturing plant. The Individual/Entity conducted source testing for Dioxin/Furan emissions on its kiln system from September through October 2015; and conducted Destruction and Removal Efficiency (DRE) testing on its kiln system calciner from May to June 2016. The Individual/Entity has violated U. S. EPA Regulations at 40 CFR and South Carolina Air Pollution Control Regulations as follows: failed to limit Dioxin/Furan emissions to 0.40 ng TEQ/dscm and failed to achieve a 99.99% DRE of 1,2-Dichlorobenzene emissions of its kiln system and its kiln system calciner.

Action: The Individual/Entity is required to: comply with Subpart EEE; cease burning hazardous waste derived fuel, conditionally, until it can demonstrate compliance with Dioxin/Furan emission limits; maintain compliance with a DRE of 99.99% from the kiln system calciner; comply with its permit; and pay to the Department a civil penalty in the amount of ten thousand dollars (**\$10,000.00**).

33) Order Type and Number: Consent Order 17-034-A  
Order Date: October 19, 2017  
Individual/Entity: **City of Orangeburg Department of Public Utilities**  
Facility: City of Orangeburg Department of Public Utilities  
Location: 369 Gulbrandsen Road  
Orangeburg, SC 29116  
Mailing Address: P.O. Box 1057  
Orangeburg, SC 29116  
County: Orangeburg  
Previous Orders: None  
Permit/ID Number: 1860-0085  
Violations Cited: U.S. EPA 40 CFR 63 and 5 S.C. Code Ann. Regs. 61-62.63, Subpart ZZZZ; U.S. EPA 40 CFR 60 and 5 S.C. Code Ann. Regs. 61-62.60, Subpart JJJJ; and 5 S.C. Code Ann. Regs. 61-62.1, Section II, Permit Requirements

Summary: City of Orangeburg Department of Public Utilities (Individual/Entity), located in Orangeburg, South Carolina, operates a publicly owned wastewater treatment plant. The Individual/Entity conducted a source test on its generator on April 6, 2017, and exceeded its emission limit for carbon monoxide (CO). The Individual/Entity violated U.S. EPA Regulations at 40 CFR and South Carolina Air Pollution Control Regulations as follows: failed to limit CO emissions from its generator to 270 parts per million during a source test.

Action: The Individual/Entity is required to: limit CO emissions to 270 ppm, limit operation of its generator to an output load of 1950 kW until such time as a source test is conducted to establish a higher output load, perform a source test on its generator before October 6, 2018, and pay a civil penalty in the amount of four thousand, five hundred dollars **(\$4,500.00)**.

34) Order Type and Number: Consent Order 17-038-A  
Order Date: October 19, 2017  
Individual/Entity: **American Yuncheng Gravure Cylinder, Inc.**  
Facility: American Yuncheng Gravure Cylinder, Inc.  
Location: 150 Ian Court  
Spartanburg, SC 29306  
Mailing Address: Same  
County: Spartanburg  
Previous Orders: None  
Permit/ID Number: 2060-0468  
Violations Cited: U.S. EPA regulations at 40 CFR Part 63 and 5 South Carolina Code Ann. Regs. 61-62.63 (Supp. 2016), National Emission Standards for Hazardous Air Pollutants for Source Categories, Subpart N, National Emission Standards for Chromium Emissions From Hard and Decorative Chromium Electroplating and Chromium Anodizing Tanks, and 5 S.C. Code Ann. Regs. 61-62.1, Section II, Permit Requirements

Summary: American Yuncheng Gravure Cylinder, Inc. (Individual/Entity) operates a hard chromium plating process in Spartanburg, South Carolina. On September 28, 2011, the Department issued State Operating Permit 2060-0468 to the Individual/Entity. On May 29, 2016, the Department conducted a comprehensive inspection. The Individual/Entity has violated U.S. EPA regulations at 40 CFR Part 63 and South Carolina Air Pollution Control Regulation as follows: failed

to maintain records of inspection and maintenance for its monitoring equipment; failed to maintain records of monitoring data that are used to demonstrate compliance with the standard; failed to record the date and time that fume suppressant was added to the electroplating bath; failed to maintain all documentation supporting the notifications and reports required by Subpart A and Subpart N; failed to maintain all records for a period of 5 years in accordance with Subpart A; and, failed to prepare annual summary reports to document the ongoing compliance status of the affected source.

Action: The Individual/Entity is required to: henceforth comply with the applicable monitoring, record keeping, and reporting requirements of Subpart N; and pay a civil penalty in the amount of fourteen thousand dollars **(\$14,000.00)**.

## **BUREAU OF ENVIRONMENTAL HEALTH SERVICES**

### **Food Safety Enforcement**

35) Order Type and Number: Consent Order 2016-206-01-039  
Order Date: October 2, 2017  
Individual/Entity: **Chopping Block**  
Facility: Chopping Block  
Location: 11003C Anderson Road  
Piedmont, SC 29673  
Mailing Address: 545 Old Pendleton Road  
Easley, SC 29642  
County: Anderson  
Previous Orders: None  
Permit Number: 04-206-03850  
Violations Cited: S.C. Code Ann. Regs. 61-25

Summary: Chopping Block (Individual/Entity) is a restaurant located in Piedmont, South Carolina. The Department conducted inspections on December 21, 2015, and June 28, 2016. The Individual/Entity has violated the South Carolina Retail Food Establishment Regulation as follows: failed to maintain the proper sanitization concentration in a chemical sanitizer used in a manual or mechanical operation during contact times.

Action: The Individual/Entity is required to: operate and maintain the facility in accordance with the requirements of all applicable regulations, including S.C. Regs. 61-25; and pay a civil penalty in the amount of eight hundred dollars **(\$800.00)**.

36) Order Type and Number: Consent Order 2016-206-06-158  
Order Date: October 2, 2017  
Individual/Entity: **Holiday Inn Express**  
Facility: Holiday Inn Express  
Location: 1303-A Tadlock Drive  
Murrells Inlet, SC 29576  
Mailing Address: Same  
County: Horry  
Previous Orders: None  
Permit Number: 26-206-10780  
Violations Cited: S.C. Code Ann. Regs. 61-25

Summary: Holiday Inn Express (Individual/Entity) operates a restaurant located in Murrells Inlet, South Carolina. The Department conducted inspections on November 30, 2016, December



Action: The Individual/Entity is required to: operate and maintain the facility in accordance with the requirements of all applicable regulations, including S.C. Regs. 61-25; and pay a civil penalty in the amount of eight hundred dollars **(\$800.00)**.

39) Order Type and Number: Consent Order 2017-206-02-025  
Order Date: October 2, 2017  
Individual/Entity: **Blockhouse Restaurant**  
Facility: Blockhouse Restaurant  
Location: 1619 Augusta Street  
Greenville, SC 29601  
Mailing Address: Same  
County: Greenville  
Previous Orders: 2017-206-02-003 (\$800.00)  
Permit Number: 23-206-03818  
Violations Cited: S.C. Code Ann. Regs. 61-25

Summary: Blockhouse Restaurant (Individual/Entity) is a restaurant located in Greenville, South Carolina. The Department conducted an inspection on August 10, 2017. The Individual/Entity has violated the South Carolina Retail Food Establishment Regulation as follows: failed to maintain proper holding temperatures of time/temperature control for safety foods.

Action: The Individual/Entity is required to: operate and maintain the facility in accordance with the requirements of all applicable regulations, including S.C. Regs. 61-25; and pay a civil penalty in the amount of seven hundred fifty dollars **(\$750.00)**.

40) Order Type and Number: Consent Order 2017-206-03-009  
Order Date: October 2, 2017  
Individual/Entity: **Persis**  
Facility: Persis  
Location: 1728 Bush River Road  
Columbia, SC 29210  
Mailing Address: 15018 Bridle Trace Lane  
Pineville, NC 28134  
County: Lexington  
Previous Orders: None  
Permit Number: 32-206-06495  
Violations Cited: S.C. Code Ann. Regs. 61-25

Summary: Persis (Individual/Entity) is a restaurant located in Columbia, South Carolina. The Department conducted inspections on September 6, 2016, March 21, 2017, May 16, 2017, and May 26, 2017. The Individual/Entity has violated the South Carolina Retail Food Establishment Regulation as follows: failed to maintain proper holding temperatures of time/temperature control for safety foods.

Action: The Individual/Entity is required to: operate and maintain the facility in accordance with the requirements of all applicable regulations, including S.C. Regs. 61-25; and pay a civil penalty in the amount of one thousand, six hundred dollars **(\$1,600.00)**.

41) Order Type and Number: Consent Order 2017-206-03-030  
Order Date: October 2, 2017  
Individual/Entity: **Taqueria Guadalajara**  
Facility: Taqueria Guadalajara  
Location: 1807 Decker Boulevard  
Columbia, SC 29206  
Mailing Address: 409 Libby Lane  
Lexington, SC 29072  
County: Richland  
Previous Orders: None  
Permit Number: 40-206-07338  
Violations Cited: S.C. Code Ann. Regs. 61-25

Summary: Taqueria Guadalajara (Individual/Entity) is a restaurant located in Columbia, South Carolina. The Department conducted inspections on June 21, 2017, June 29, 2017, July 6, 2017, and July 10, 2017. The Individual/Entity has violated the South Carolina Retail Food Establishment Regulation as follows: failed to maintain proper holding temperatures of time/temperature control for safety foods.

Action: The Individual/Entity is required to: operate and maintain the facility in accordance with the requirements of all applicable regulations, including S.C. Regs. 61-25; and pay a civil penalty in the amount of one thousand, six hundred dollars **(\$1,600.00)**.

42) Order Type and Number: Consent Order 2017-206-03-050  
Order Date: October 2, 2017  
Individual/Entity: **Waffle House #1738**  
Facility: Waffle House #1738  
Location: 2993 Main Street  
Newberry, SC 29108  
Mailing Address: P.O. Box 6450  
Norcross, GA 30091  
County: Newberry  
Previous Orders: None  
Permit Number: 36-206-01152  
Violations Cited: S.C. Code Ann. Regs. 61-25

Summary: Waffle House #1738 (Individual/Entity) is a restaurant located in Newberry, South Carolina. The Department conducted inspections on January 11, 2017, March 2, 2017, and March 9, 2017. The Individual/Entity has violated the South Carolina Retail Food Establishment Regulation as follows: failed to clean ice bins and beverage dispensing nozzles at a frequency necessary to preclude accumulation of soil or mold.

Action: The Individual/Entity is required to: operate and maintain the facility in accordance with the requirements of all applicable regulations, including S.C. Regs. 61-25; and pay a civil penalty in the amount of two hundred dollars **(\$200.00)**.

43) Order Type and Number: Consent Order 2017-206-03-057  
Order Date: October 2, 2017  
Individual/Entity: **Food Lion #841 Deli**  
Facility: Food Lion #841 Deli  
Location: 801 Bethel Road  
Clover, SC 29710  
Mailing Address: P.O. Box 1330

County: Salisbury, SC 28145  
Previous Orders: York  
Permit Number: None  
Violations Cited: 46-206-01182  
S.C. Code Ann. Regs. 61-25

Summary: Food Lion #841 Deli (Individual/Entity) is a deli located in Clover, South Carolina. The Department conducted inspections on April 20, 2016, April 12, 2017, and April 21, 2017. The Individual/Entity has violated the South Carolina Retail Food Establishment Regulation as follows: failed to maintain proper holding temperatures of time/temperature control for safety foods.

Action: The Individual/Entity is required to: operate and maintain the facility in accordance with the requirements of all applicable regulations, including S.C. Regs. 61-25; and pay a civil penalty in the amount of eight hundred dollars **(\$800.00)**.

44) Order Type and Number: Consent Order 2017-206-04-003  
Order Date: October 2, 2017  
Individual/Entity: **Piggly Wiggly Deli #90**  
Facility: Piggly Wiggly Deli #90  
Location: 1011 Broad Street  
Sumter, SC 29150  
Mailing Address: Same  
County: Sumter  
Previous Orders: None  
Permit Number: 43-206-00279  
Violations Cited: S.C. Code Ann. Regs. 61-25

Summary: Piggly Wiggly Deli #90 (Individual/Entity) is a deli located in Sumter, South Carolina. The Department conducted inspections on January 4, 2017, February 3, 2017, and February 13, 2017. The Individual/Entity has violated the South Carolina Retail Food Establishment Regulation as follows: failed to maintain proper holding temperatures of time/temperature control for safety foods.

Action: The Individual/Entity is required to: operate and maintain the facility in accordance with the requirements of all applicable regulations, including S.C. Regs. 61-25; and pay a civil penalty in the amount of eight hundred dollars **(\$800.00)**.

45) Order Type and Number: Consent Order 2017-206-06-028  
Order Date: October 2, 2017  
Individual/Entity: **Little Pigs BBQ at Surfside**  
Facility: Little Pigs BBQ at Surfside  
Location: 3901 Dick Pond Road, Suite C  
Myrtle Beach, SC 29588  
Mailing Address: Same  
County: Horry  
Previous Orders: None  
Permit Number: 26-206-12094  
Violations Cited: S.C. Code Ann. Regs. 61-25

Summary: Little Pigs BBQ at Surfside (Individual/Entity) is a restaurant located in Myrtle Beach, South Carolina. The Department conducted inspections on April 6, 2016, December 6, 2016, May 2, 2017, and May 22, 2017. The Individual/Entity has violated the South Carolina Retail Food

Establishment Regulation as follows: failed to properly cool cooked time/temperature control for safety foods; failed to use effective methods to cool cooked time/temperature control for safety foods; and failed to maintain the physical facilities in good repair.

Action: The Individual/Entity is required to: operate and maintain the facility in accordance with the requirements of all applicable regulations, including S.C. Regs. 61-25; and pay a civil penalty in the amount of nine hundred fifty dollars **(\$950.00)**.

46) Order Type and Number: Consent Order 2017-206-06-051  
Order Date: October 2, 2017  
Individual/Entity: **Mr. Crab**  
Facility: Mr. Crab  
Location: 610 North Kings Highway  
Myrtle Beach, SC 29577  
Mailing Address: Same  
County: Horry  
Previous Orders: None  
Permit Number: 26-206-12659  
Violations Cited: S.C. Code Ann. Regs. 61-25

Summary: Mr. Crab (Individual/Entity) is a restaurant located in Myrtle Beach, South Carolina. The Department conducted inspections on June 8, 2017, June 14, 2017, and August 1, 2017. The Individual/Entity has violated the South Carolina Retail Food Establishment Regulation as follows: failed to maintain proper holding temperatures of time/temperature control for safety foods.

Action: The Individual/Entity is required to: operate and maintain the facility in accordance with the requirements of all applicable regulations, including S.C. Regs. 61-25; and pay a civil penalty in the amount of eight hundred dollars **(\$800.00)**.

47) Order Type and Number: Consent Order 2017-206-06-054  
Order Date: October 2, 2017  
Individual/Entity: **Café Amalfi**  
Facility: Café Amalfi  
Location: 10000 Beach Club Drive  
Myrtle Beach, SC 29572  
Mailing Address: Same  
County: Horry  
Previous Orders: None  
Permit Number: 26-206-08837  
Violations Cited: S.C. Code Ann. Regs. 61-25

Summary: Café Amalfi (Individual/Entity) is a restaurant located in Myrtle Beach, South Carolina. The Department conducted inspections on July 7, 2016, January 24, 2017, and May 23, 2017. The Individual/Entity has violated the South Carolina Retail Food Establishment Regulation as follows: failed to maintain proper holding temperatures of time/temperature control for safety foods.

Action: The Individual/Entity is required to: operate and maintain the facility in accordance with the requirements of all applicable regulations, including S.C. Regs. 61-25; and pay a civil penalty in the amount of eight hundred dollars **(\$800.00)**.

48) Order Type and Number: Consent Order 2017-206-06-059  
Order Date: October 2, 2017  
Individual/Entity: **Key West Grill**  
Facility: Key West Grill  
Location: 1214 Celebrity Circle  
Myrtle Beach, SC 29577  
Mailing Address: 2008 Savannah Highway  
Charleston, SC 29407  
County: Horry  
Previous Orders: None  
Permit Number: 26-206-07038  
Violations Cited: S.C. Code Ann. Regs. 61-25

Summary: Key West Grill (Individual/Entity) is a restaurant located in Myrtle Beach, South Carolina. The Department conducted inspections on March 9, 2016, January 6, 2017, and June 7, 2017. The Individual/Entity has violated the South Carolina Retail Food Establishment Regulation as follows: failed to maintain proper holding temperatures of time/temperature control for safety foods.

Action: The Individual/Entity is required to: operate and maintain the facility in accordance with the requirements of all applicable regulations, including S.C. Regs. 61-25; and pay a civil penalty in the amount of eight hundred dollars **(\$800.00)**.

49) Order Type and Number: Consent Order 2017-206-07-025  
Order Date: October 2, 2017  
Individual/Entity: **Jestine's Kitchen**  
Facility: Jestine's Kitchen  
Location: 251 Meeting Street  
Charleston, SC 29401  
Mailing Address: Same  
County: Charleston  
Previous Orders: None  
Permit Number: 10-206-02351  
Violations Cited: S.C. Code Ann. Regs. 61-25

Summary: Jestine's Kitchen (Individual/Entity) is a restaurant located in Charleston, South Carolina. The Department conducted inspections on August 2, 2016, July 27, 2017, and August 4, 2017. The Individual/Entity has violated the South Carolina Retail Food Establishment Regulation as follows: failed to use effective methods to cool cooked time/temperature control for safety foods.

Action: The Individual/Entity is required to: operate and maintain the facility in accordance with the requirements of all applicable regulations, including S.C. Regs. 61-25; and pay a civil penalty in the amount of four hundred dollars **(\$400.00)**.

50) Order Type and Number: Consent Order 2017-206-08-004  
Order Date: October 2, 2017  
Individual/Entity: **Tiger Express #2**  
Facility: Tiger Express #2  
Location: 51 South Railroad Avenue  
Brunson, SC 29911  
Mailing Address: 6 Rush Street  
Beaufort, SC 29907  
County: Hampton

Previous Orders: None  
Permit Number: 25-206-01120  
Violations Cited: S.C. Code Ann. Regs. 61-25

Summary: Tiger Express #2 (Individual/Entity) is a convenience store located in Brunson, South Carolina. The Department conducted inspections on June 22, 2017, July 7, 2017, July 17, 2017, and July 27, 2017. The Individual/Entity has violated the South Carolina Retail Food Establishment Regulation as follows: failed to provide water at a temperature of at least 100°F through a mixing valve or combination faucet at the handwashing sink(s).

Action: The Individual/Entity is required to: operate and maintain the facility in accordance with the requirements of all applicable regulations, including S.C. Regs. 61-25; and pay a civil penalty in the amount of eight hundred dollars **(\$800.00)**.

51) Order Type and Number: Consent Order 2017-206-08-005  
Order Date: October 2, 2017  
Individual/Entity: **Hampton Restaurant**  
Facility: Hampton Restaurant  
Location: 704 Elm Street West  
Hampton, SC 29924  
Mailing Address: P.O. Box 293  
Hampton, SC 29924  
County: Hampton  
Previous Orders: 2016-206-08-031 (\$550.00)  
Permit Number: 25-206-01166  
Violations Cited: S.C. Code Ann. Regs. 61-25

Summary: Hampton Restaurant (Individual/Entity) is a restaurant located in Hampton, South Carolina. The Department conducted an inspection on August 9, 2017. The Individual/Entity has violated the South Carolina Retail Food Establishment Regulation as follows: failed to maintain proper holding temperatures of time/temperature control for safety foods.

Action: The Individual/Entity is required to: operate and maintain the facility in accordance with the requirements of all applicable regulations, including S.C. Regs. 61-25; and pay a civil penalty in the amount of one thousand dollars **(\$1,000.00)**.

52) Order Type and Number: Consent Order 2017-206-03-037  
Order Date: October 4, 2017  
Individual/Entity: **Sandy's Famous Hot Dogs**  
Facility: Sandy's Famous Hot Dogs  
Location: 5175 Sunset Boulevard, Suite 13  
Lexington, SC 29072  
Mailing Address: 140 North Beaver Dam Road  
Columbia, SC 29212  
County: Lexington  
Previous Orders: None  
Permit Number: 32-206-03046  
Violations Cited: S.C. Code Ann. Regs. 61-25

Summary: Sandy's Famous Hot Dogs (Individual/Entity), is a restaurant located in Lexington, South Carolina. The Department conducted inspections on March 9, 2016, February 2, 2017, and February 3, 2017. The Individual/Entity has violated the South Carolina Retail Food

Establishment Regulation as follows: failed to maintain proper holding temperatures of time/temperature control for safety foods.

Action: The Individual/Entity is required to: operate and maintain the facility in accordance with the requirements of all applicable regulations, including S.C. Regs. 61-25; and pay a civil penalty in the amount of eight hundred dollars **(\$800.00)**.

53) Order Type and Number: Consent Order 2017-206-06-036  
Order Date: October 4, 2017  
Individual/Entity: **Jimmyz Original Hibachi House**  
Facility: Jimmyz Original Hibachi House  
Location: 1780 Pine Island Road  
Myrtle Beach, SC 29577  
Mailing Address: Same  
County: Horry  
Previous Orders: 2016-206-06-092 (\$800.00)  
Permit Number: 26-206-12750  
Violations Cited: S.C. Code Ann. Regs. 61-25

Summary: Jimmyz Original Hibachi House (Individual/Entity) is a restaurant located in Myrtle Beach, South Carolina. The Department conducted inspections on November 9, 2016, May 1, 2017, and May 9, 2017. The Individual/Entity has violated the South Carolina Retail Food Establishment Regulation as follows: failed to maintain proper holding temperatures of time/temperature control for safety foods; and failed to provide lockers or other suitable facilities for orderly storage of employees' clothing and other possessions.

Action: The Individual/Entity is required to: operate and maintain the facility in accordance with the requirements of all applicable regulations, including S.C. Regs. 61-25; and pay a civil penalty in the amount of one thousand, four hundred dollars **(\$1,400.00)**.

54) Order Type and Number: Consent Order 2017-206-07-017  
Order Date: October 4, 2017  
Individual/Entity: **Waffle House #715**  
Facility: Waffle House #715  
Location: 354 College Park Road  
Ladson, SC 29456  
Mailing Address: P.O. Box 6450  
Norcross, GA 30091  
County: Berkeley  
Previous Orders: None  
Permit Number: 08-206-00539  
Violations Cited: S.C. Code Ann. Regs. 61-25

Summary: Waffle House #715 (Individual/Entity) is a restaurant located in Ladson, South Carolina. The Department conducted inspections on July 29, 2016, August 9, 2016, and July 18, 2017. The Individual/Entity has violated the South Carolina Retail Food Establishment Regulation as follows: failed to maintain proper holding temperatures of time/temperature control for safety foods.

Action: The Individual/Entity is required to: operate and maintain the facility in accordance with the requirements of all applicable regulations, including S.C. Regs. 61-25; and pay a civil penalty in the amount of five hundred fifty dollars **(\$550.00)**.

55) Order Type and Number: Consent Order 2017-206-03-058  
Order Date: October 9, 2017  
Individual/Entity: **Papa Gio's of Lexington Inc.**  
Facility: Papa Gio's of Lexington Inc.  
Location: 109-J Old Chapin Road  
Lexington, SC 29072  
Mailing Address: Same  
County: Lexington  
Previous Orders: None  
Permit Number: 32-206-06317  
Violations Cited: S.C. Code Ann. Regs. 61-25

Summary: Papa Gio's of Lexington Inc. (Individual/Entity) is a restaurant located in Lexington, South Carolina. The Department conducted inspections on July 27, 2016, April 20, 2017, and April 28, 2017. The Individual/Entity has violated the South Carolina Retail Food Establishment Regulation as follows: failed to properly cool cooked time/temperature control for safety foods.

Action: The Individual/Entity is required to: operate and maintain the facility in accordance with the requirements of all applicable regulations, including S.C. Regs. 61-25; and pay a civil penalty in the amount of eight hundred dollars (**\$800.00**).

56) Order Type and Number: Consent Order 2017-206-06-060  
Order Date: October 9, 2017  
Individual/Entity: **Pee Dee Exchange**  
Facility: Pee Dee Exchange  
Location: 6450 Highway 378  
Conway, SC 29527  
Mailing Address: Same  
County: Horry  
Previous Orders: None  
Permit Number: 26-206-13224  
Violations Cited: S.C. Code Ann. Regs. 61-25

Summary: Pee Dee Exchange (Individual/Entity) is a restaurant located in Conway, South Carolina. The Department conducted inspections on April 29, 2016, December 13, 2016, and December 16, 2016. The Individual/Entity has violated the South Carolina Retail Food Establishment Regulation as follows: failed to maintain proper holding temperatures of time/temperature control for safety foods.

Action: The Individual/Entity is required to: operate and maintain the facility in accordance with the requirements of all applicable regulations, including S.C. Regs. 61-25; and pay a civil penalty in the amount of six hundred fifty-six dollars (**\$656.00**).

57) Order Type and Number: Consent Order 2017-206-02-032  
Order Date: October 10, 2017  
Individual/Entity: **Kanpai of Tokyo**  
Facility: Kanpai of Tokyo  
Location: 2300 Winchester Place  
Spartanburg, SC 29301  
Mailing Address: P.O. Box 27103  
Greenville, SC 29616  
County: Spartanburg  
Previous Orders: None

Permit Number: 42-206-02001  
Violations Cited: S.C. Code Ann. Regs. 61-25

Summary: Kanpai of Tokyo (Individual/Entity) is a restaurant located in Spartanburg, South Carolina. The Department conducted inspections on July 11, 2016, April 24, 2017, and August 17, 2017. The Individual/Entity has violated the South Carolina Retail Food Establishment Regulation as follows: failed to maintain proper holding temperatures of time/temperature control for safety foods.

Action: The Individual/Entity is required to: operate and maintain the facility in accordance with the requirements of all applicable regulations, including S.C. Regs. 61-25; and pay a civil penalty in the amount of eight hundred dollars **(\$800.00)**.

58) Order Type and Number: Consent Order 2017-206-04-004  
Order Date: October 10, 2017  
Individual/Entity: **Porter's 66**  
Facility: Porter's 66  
Location: 3815 Myrtle Beach Highway  
Sumter, SC 29150  
Mailing Address: Same  
County: Sumter  
Previous Orders: None  
Permit Number: 43-206-00603  
Violations Cited: S.C. Code Ann. Regs. 61-25

Summary: Porter's 66 (Individual/Entity) is a convenience store located in Sumter, South Carolina. The Department conducted inspections on December 8, 2016, December 15, 2016, June 6, 2017, and June 14, 2017. The Individual/Entity has violated the South Carolina Retail Food Establishment Regulation as follows: failed to maintain proper holding temperatures of time/temperature control for safety foods.

Action: The Individual/Entity is required to: operate and maintain the facility in accordance with the requirements of all applicable regulations, including S.C. Regs. 61-25; and pay a civil penalty in the amount of one thousand, three hundred fifty dollars **(\$1,350.00)**.

59) Order Type and Number: Consent Order 2017-206-07-020  
Order Date: October 10, 2017  
Individual/Entity: **La Hacienda**  
Facility: La Hacienda  
Location: 6322 Rivers Avenue  
North Charleston, SC 29406  
Mailing Address: Same  
County: Charleston  
Previous Orders: 2015-206-07-052 (\$800.00)  
Permit Number: 10-206-01928  
Violations Cited: S.C. Code Ann. Regs. 61-25

Summary: La Hacienda (Individual/Entity) operates a restaurant located in North Charleston, South Carolina. The Department conducted inspections on July 6, 2016, July 15, 2016, May 31, 2017, June 9, 2017, and June 19, 2017. The Individual/Entity has violated the South Carolina Retail Food Establishment Regulation as follows: failed to maintain proper holding temperatures of time/temperature control for safety foods; failed to demonstrate knowledge of

foodborne disease prevention by having no priority violations during the inspection; and failed to maintain the premises free of insects, rodents, and other pests.

Action: The Individual/Entity is required to: operate and maintain the facility in accordance with the requirements of all applicable regulations, including S.C. Regs. 61-25; and pay a civil penalty in the amount of three thousand dollars **(\$3,000.00)**.

60) Order Type and Number: Consent Order 2017-206-02-016  
Order Date: October 11, 2017  
Individual/Entity: **China Restaurant**  
Facility: China Restaurant  
Location: 231 West Butler Road  
Mauldin, SC 29662  
Mailing Address: Same  
County: Greenville  
Previous Orders: None  
Permit Number: 23-206-06028  
Violations Cited: S.C. Code Ann. Regs. 61-25

Summary: China Restaurant (Individual/Entity) is a restaurant located in Mauldin, South Carolina. The Department conducted inspections on December 1, 2015, November 17, 2016, and November 21, 2016. The Individual/Entity has violated the South Carolina Retail Food Establishment Regulation as follows: failed to protect food from contamination by storing in a clean, dry location, where it is not exposed to splash, dust, or other contamination, at least 6 inches above the floor.

Action: The Individual/Entity is required to: operate and maintain the facility in accordance with the requirements of all applicable regulations, including S.C. Regs. 61-25; and pay a civil penalty in the amount of two hundred dollars **(\$200.00)**.

61) Order Type and Number: Consent Order 2017-206-06-056  
Order Date: October 11, 2017  
Individual/Entity: **Indo Thai Sushi**  
Facility: Indo Thai Sushi  
Location: 47 A Dagullah Way  
Pawleys Island, SC 29585  
Mailing Address: 980 Cipriana Drive, Unit A6  
Myrtle Beach, SC 29572  
County: Georgetown  
Previous Orders: None  
Permit Number: 22-206-06071  
Violations Cited: S.C. Code Ann. Regs. 61-25

Summary: Indo Thai Sushi (Individual/Entity) is a restaurant located in Pawleys Island, South Carolina. The Department conducted inspections on April 21, 2015, February 23, 2016, and January 23, 2017. The Individual/Entity has violated the South Carolina Retail Food Establishment Regulation as follows: failed to provide individual disposable towels, a continuous towel system that supplies the user with a clean towel, a heated air hand drying drive, or a hand-drying device that employs an air-knife system that delivers high velocity, pressurized air at ambient temperatures at each hand washing sink or group of adjacent handwashing sinks.

Action: The Individual/Entity is required to: operate and maintain the facility in accordance with the requirements of all applicable regulations, including S.C. Regs. 61-25; and pay a civil penalty in the amount of four hundred dollars **(\$400.00)**.

62) Order Type and Number: Consent Order 2017-206-07-005  
Order Date: October 12, 2017  
Individual/Entity: **La Hacienda Mexican Restaurant**  
Facility: La Hacienda Mexican Restaurant  
Location: 808 Folly Road  
Charleston, SC 29412  
Mailing Address: Same  
County: Charleston  
Previous Orders: 2016-207-07-046 (\$1,200.00)  
Permit Number: 10-206-02526  
Violations Cited: S.C. Code Ann. Regs. 61-25

Summary: La Hacienda Mexican Restaurant (Individual/Entity) is a restaurant located in Charleston, South Carolina. The Department conducted an inspection on March 7, 2017. The Individual/Entity has violated the South Carolina Retail Food Establishment Regulation as follows: failed to maintain proper holding temperatures of time/temperature control for safety foods.

Action: The Individual/Entity is required to: operate and maintain the facility in accordance with the requirements of all applicable regulations, including S.C. Regs. 61-25; and pay a civil penalty in the amount of one thousand dollars **(\$1,000.00)**.

63) Order Type and Number: Consent Order 2017-206-01-023  
Order Date: October 12, 2017  
Individual/Entity: **Pricewise Food #187 Deli**  
Facility: Pricewise Food #187 Deli  
Location: 1160 South Main Street  
Greenwood, SC 29646  
Mailing Address: P.O. Box 40009  
Charleston, SC 29423  
County: Greenwood  
Previous Orders: None  
Permit Number: 24-206-03085  
Violations Cited: S.C. Code Ann. Regs. 61-25

Summary: Pricewise Food #187 Deli (Individual/Entity) is a deli located in Greenwood, South Carolina. The Department conducted inspections on April 29, 2016, April 13, 2017, and August 31, 2017. The Individual/Entity has violated the South Carolina Retail Food Establishment Regulation as follows: failed to maintain proper holding temperatures of time/temperature control for safety foods.

Action: The Individual/Entity is required to: operate and maintain the facility in accordance with the requirements of all applicable regulations, including S.C. Regs. 61-25; and pay a civil penalty in the amount of eight hundred dollars **(\$800.00)**.

64) Order Type and Number: Consent Order 2017-206-01-023  
Order Date: October 12, 2017  
Individual/Entity: **Howard's on Main**  
Facility: Howard's on Main  
Location: 330 Main Street  
Greenwood, SC 29646  
Mailing Address: Same  
County: Greenwood  
Previous Orders: None  
Permit Number: 24-206-01873  
Violations Cited: S.C. Code Ann. Regs. 61-25

Summary: Howard's on Main (Individual/Entity) is a restaurant located in Greenwood, South Carolina. The Department conducted inspections on August 31, 2017, September 1, 2017, and September 5, 2017. The Individual/Entity has violated the South Carolina Retail Food Establishment Regulation as follows: failed to maintain proper holding temperatures of time/temperature control for safety foods.

Action: The Individual/Entity is required to: operate and maintain the facility in accordance with the requirements of all applicable regulations, including S.C. Regs. 61-25; and pay a civil penalty in the amount of eight hundred dollars (**\$800.00**).

65) Order Type and Number: Consent Order 2017-206-07-023  
Order Date: October 12, 2017  
Individual/Entity: **CO**  
Facility: CO  
Location: 340 King Street  
Charleston, SC 29401  
Mailing Address: P.O. Box 22015  
Charleston, SC 29401  
County: Charleston  
Previous Orders: None  
Permit Number: 10-206-08242  
Violations Cited: S.C. Code Ann. Regs. 61-25

Summary: CO (Individual/Entity) is a restaurant located in Charleston, South Carolina. The Department conducted inspections on July 18, 2016, January 30, 2017, and June 28, 2017. The Individual/Entity has violated the South Carolina Retail Food Establishment Regulation as follows: failed to ensure that the handwashing sinks were accessible at all times; and failed to ensure employees washed their hands between tasks or working with foods, prior to donning gloves.

Action: The Individual/Entity is required to: operate and maintain the facility in accordance with the requirements of all applicable regulations, including S.C. Regs. 61-25; and pay a civil penalty in the amount of eight hundred dollars (**\$800.00**).

66) Order Type and Number: Consent Order 2017-206-06-055  
Order Date: October 12, 2017  
Individual/Entity: **Webster's Low Country Grill**  
Facility: Webster's Low Country Grill  
Location: 14276 Ocean Highway  
Pawleys Island, SC 29585  
Mailing Address: P.O. Box 320

County: Pawleys Island, SC 29585  
Previous Orders: Georgetown  
Permit Number: None  
Violations Cited: 22-206-05228  
S.C. Code Ann. Regs. 61-25

Summary: Webster's Low Country Grill (Individual/Entity) is a restaurant located in Pawleys Island, South Carolina. The Department conducted inspections on March 16, 2015, March 3, 2016, and January 26, 2017. The Individual/Entity has violated the South Carolina Retail Food Establishment Regulation as follows: failed to maintain proper holding temperatures of time/temperature control for safety foods.

Action: The Individual/Entity is required to: operate and maintain the facility in accordance with the requirements of all applicable regulations, including S.C. Regs. 61-25; and pay a civil penalty in the amount of eight hundred dollars **(\$800.00)**.

67) Order Type and Number: Consent Order 2017-206-02-018  
Order Date: October 17, 2017  
Individual/Entity: **American Roadside Burgers**  
Facility: American Roadside Burgers  
Location: 301 East McBee Avenue  
Greenville, SC 29601  
Mailing Address: 5821 Fairview Road, Suite 104  
Charlotte, NC 28209  
County: Greenville  
Previous Orders: None  
Permit Number: 23-206-10831  
Violations Cited: S.C. Code Ann. Regs. 61-25

Summary: American Roadside Burgers (Individual/Entity) is a restaurant located in Greenville, South Carolina. The Department conducted inspections on September 13, 2016, September 23, 2016, and May 18, 2017. The Individual/Entity has violated the South Carolina Retail Food Establishment Regulation as follows: failed to maintain proper holding temperatures of time/temperature control for safety foods.

Action: The Individual/Entity is required to: operate and maintain the facility in accordance with the requirements of all applicable regulations, including S.C. Regs. 61-25; and pay a civil penalty in the amount of eight hundred dollars **(\$800.00)**.

68) Order Type and Number: Consent Order 2017-206-02-030  
Order Date: October 17, 2017  
Individual/Entity: **Bojangles of Cherrydale**  
Facility: Bojangles of Cherrydale  
Location: 2545 North Pleasantburg Drive  
Greenville, SC 29609  
Mailing Address: 160 Congress Boulevard, Suite C  
Duncan, SC 29334  
County: Greenville  
Previous Orders: None  
Permit Number: 23-206-10451  
Violations Cited: S.C. Code Ann. Regs. 61-25

Summary: Bojangles of Cherrydale (Individual/Entity) is a restaurant located in Greenville, South Carolina. The Department conducted inspections on August 16, 2016, August 26, 2016, and August 8, 2017. The Individual/Entity has violated the South Carolina Retail Food Establishment Regulation as follows: failed to maintain proper holding temperatures of time/temperature control for safety foods; and failed to provide individual disposable towels at each hand washing sink or group of adjacent handwashing sinks.

Action: The Individual/Entity is required to: operate and maintain the facility in accordance with the requirements of all applicable regulations, including S.C. Regs. 61-25; and pay a civil penalty in the amount of eight hundred dollars (**\$800.00**).

69) Order Type and Number: Consent Order 2017-206-03-068  
Order Date: October 17, 2017  
Individual/Entity: **PaBoys**  
Facility: PaBoys  
Location: 3106 Broad River Road  
Columbia, SC 29210  
Mailing Address: 6446 Giraffe Road  
Harlem, GA 30814  
County: Richland  
Previous Orders: None  
Permit Number: N/A  
Violations Cited: S.C. Code Ann. Regs. 61-25

Summary: PaBoys (Individual/Entity) is a mobile food establishment located in Columbia, South Carolina. The Department conducted inspections on February 3, 2017, and September 15, 2017. The Individual/Entity has violated the South Carolina Retail Food Establishment Regulation as follows: providing food to the public without a valid permit issued by the Department.

Action: The Individual/Entity is required to: operate and maintain the facility in accordance with the requirements of all applicable regulations, including S.C. Regs. 61-25; and pay a civil penalty in the amount of one thousand, six hundred dollars (**\$1,600.00**).

70) Order Type and Number: Consent Order 2017-206-06-061  
Order Date: October 17, 2017  
Individual/Entity: **Friendly's Family Restaurant**  
Facility: Friendly's Family Restaurant  
Location: 4705 North Kings Highway  
Myrtle Beach, SC 29577  
Mailing Address: Same  
County: Horry  
Previous Orders: 2017-206-06-026 (\$800.00)  
Permit Number: 26-206-07777  
Violations Cited: S.C. Code Ann. Regs. 61-25

Summary: Friendly's Family Restaurant (Individual/Entity) is a restaurant located in Myrtle Beach, South Carolina. The Department conducted an inspection on July 21, 2017. The Individual/Entity has violated the South Carolina Retail Food Establishment Regulation as follows: failed to maintain proper holding temperatures of time/temperature control for safety foods.

Action: The Individual/Entity is required to: operate and maintain the facility in accordance with the requirements of all applicable regulations, including S.C. Regs. 61-25; and pay a civil penalty in the amount of one thousand dollars (**\$1,000.00**).

71) Order Type and Number: Consent Order 2017-206-06-062  
Order Date: October 17, 2017  
Individual/Entity: **New Ho Wah Restaurant**  
Facility: New Ho Wah Restaurant  
Location: 409 South Kings Highway  
Myrtle Beach, SC 29577  
Mailing Address: Same  
County: Horry  
Previous Orders: 2017-206-06-023 (\$800.00)  
Permit Number: 26-206-08598  
Violations Cited: S.C. Code Ann. Regs. 61-25

Summary: New Ho Wah Restaurant (Individual/Entity) is a restaurant located in Myrtle Beach, South Carolina. The Department conducted inspections on February 15, 2017, June 29, 2017, and August 23, 2017. The Individual/Entity has violated the South Carolina Retail Food Establishment Regulation as follows: failed to demonstrate knowledge of foodborne disease prevention by having no priority violations during the inspection; failed to properly cool cooked time/temperature control for safety foods; and failed to use effective methods to cool cooked time/temperature control for safety foods.

Action: The Individual/Entity is required to: operate and maintain the facility in accordance with the requirements of all applicable regulations, including S.C. Regs. 61-25; and pay a civil penalty in the amount of one thousand, two hundred fifty dollars **(\$1,250.00)**.

72) Order Type and Number: Consent Order 2017-206-06-064  
Order Date: October 19, 2017  
Individual/Entity: **Panchitos Villa**  
Facility: Panchitos Villa  
Location: 4247 Broad Street  
Loris, SC 29569  
Mailing Address: Same  
County: Horry  
Previous Orders: 2016-206-06-111 (\$800.00)  
Permit Number: 26-206-12243  
Violations Cited: S.C. Code Ann. Regs. 61-25

Summary: Panchitos Villa (Individual/Entity) is a restaurant located in Loris, South Carolina. The Department conducted an inspection on July 26, 2017. The Individual/Entity has violated the South Carolina Retail Food Establishment Regulation as follows: failed to maintain proper holding temperatures of time/temperature control for safety foods.

Action: The Individual/Entity is required to: operate and maintain the facility in accordance with the requirements of all applicable regulations, including S.C. Regs. 61-25; and pay a civil penalty in the amount of one thousand dollars **(\$1,000.00)**.

73) Order Type and Number: Consent Order 2017-206-07-014  
Order Date: October 19, 2017  
Individual/Entity: **Carolina Ale House**  
Facility: Carolina Ale House  
Location: 145 Calhoun Street, Suites 200-300  
Charleston, SC 29401

Mailing Address: P.O. Box 7367  
Columbia, SC 29202  
County: Charleston  
Previous Orders: 2016-206-07-039 (\$800.00)  
Permit Number: 10-206-09627  
Violations Cited: S.C. Code Ann. Regs. 61-25

Summary: Carolina Ale House (Individual/Entity) is a restaurant located in Charleston, South Carolina. The Department conducted an inspection on May 18, 2017. The Individual/Entity has violated the South Carolina Retail Food Establishment Regulation as follows: failed to maintain proper holding temperatures of time/temperature control for safety foods.

Action: The Individual/Entity is required to: operate and maintain the facility in accordance with the requirements of all applicable regulations, including S.C. Regs. 61-25; and pay a civil penalty in the amount of one thousand, two hundred dollars **(\$1,200.00)**.

74) Order Type and Number: Consent Order 2017-211-08-001  
Order Date: October 19, 2017  
Individual/Entity: **Los Hermanos**  
Facility: Los Hermanos  
Location: 659 Robert Smalls Parkway  
Beaufort, SC 29906  
Mailing Address: 39 Brendan Lane  
Bluffton, SC 29910  
County: Beaufort  
Previous Orders: None  
Permit Number: 07-211-00709  
Violations Cited: S.C. Code Ann. Regs. 61-25

Summary: Los Hermanos (Individual/Entity) is a grocery store located in Beaufort, South Carolina. The Department conducted inspections on June 13, 2017, June 26, 2017, and July 6, 2017. The Individual/Entity has violated the South Carolina Retail Food Establishment Regulation as follows: failed to maintain proper holding temperatures of time/temperature control for safety foods.

Action: The Individual/Entity is required to: operate and maintain the facility in accordance with the requirements of all applicable regulations, including S.C. Regs. 61-25; and pay a civil penalty in the amount of eight hundred dollars **(\$800.00)**.

75) Order Type and Number: Consent Order 2017-206-01-024  
Order Date: October 23, 2017  
Individual/Entity: **La Hacienda of Greenwood Inc**  
Facility: La Hacienda of Greenwood Inc  
Location: 515 Bypass 72 Northwest  
Greenwood, SC 29649  
Mailing Address: Same  
County: Greenwood  
Previous Orders: None  
Permit Number: 24-206-01796  
Violations Cited: S.C. Code Ann. Regs. 61-25

Summary: La Hacienda of Greenwood, Inc. (Individual/Entity) is a restaurant located in Greenwood, South Carolina. The Department conducted inspections on June 8, 2017, June 9, 2017,

June 14, 2017, September 7, 2017, September 15, 2017, and September 19, 2017. The Individual/Entity has violated the South Carolina Retail Food Establishment Regulation as follows: failed to maintain proper holding temperatures of time/temperature control for safety foods; failed to demonstrate knowledge of foodborne disease prevention by having no priority violations during the inspection; and failed to properly cool, cooked time/temperature control for safety foods.

Action: The Individual/Entity is required to: operate and maintain the facility in accordance with the requirements of all applicable regulations, including S.C. Regs. 61-25; and pay a civil penalty in the amount of three thousand, eight hundred dollars **(\$3,800.00)**.

76) Order Type and Number: Consent Order 2017-206-01-026  
Order Date: October 23, 2017  
Individual/Entity: **Texas Roadhouse**  
Facility: Texas Roadhouse  
Location: 4119 Clemson Boulevard  
Anderson, SC 29625  
Mailing Address: Same  
County: Anderson  
Previous Orders: None  
Permit Number: 04-206-02751  
Violations Cited: S.C. Code Ann. Regs. 61-25

Summary: Texas Roadhouse (Individual/Entity) is a restaurant located in Anderson, South Carolina. The Department conducted inspections on December 8, 2015, August 30, 2016, and August 17, 2017. The Individual/Entity has violated the South Carolina Retail Food Establishment Regulation as follows: failed to maintain proper holding temperatures of time/temperature control for safety foods.

Action: The Individual/Entity is required to: operate and maintain the facility in accordance with the requirements of all applicable regulations, including S.C. Regs. 61-25; and pay a civil penalty in the amount of eight hundred dollars **(\$800.00)**.

77) Order Type and Number: Consent Order 2017-206-02-034  
Order Date: October 23, 2017  
Individual/Entity: **Mary Beth's**  
Facility: Mary Beth's  
Location: 500 East McBee, Suite 109  
Greenville, SC 29601  
Mailing Address: Same  
County: Greenville  
Previous Orders: None  
Permit Number: 23-206-09471  
Violations Cited: S.C. Code Ann. Regs. 61-25

Summary: Mary Beth's (Individual/Entity) is a restaurant located in Greenville, South Carolina. The Department conducted inspections on February 24, 2016, December 7, 2016, and September 1, 2017. The Individual/Entity has violated the South Carolina Retail Food Establishment Regulation as follows: failed to maintain proper holding temperatures of time/temperature control for safety foods.

Action: The Individual/Entity is required to: operate and maintain the facility in accordance with the requirements of all applicable regulations, including S.C. Regs. 61-25; and pay a civil penalty in the amount of eight hundred dollars **(\$800.00)**.

78) Order Type and Number: Consent Order 2017-206-03-069  
Order Date: October 23, 2017  
Individual/Entity: **Lizard's Thicket #10**  
Facility: Lizard's Thicket #10  
Location: 1824 Broad River Road  
Columbia, SC 29210  
Mailing Address: 1036 Market Street  
Columbia, SC 29210  
County: Richland  
Previous Orders: None  
Permit Number: 40-206-01828  
Violations Cited: S.C. Code Ann. Regs. 61-25

Summary: Lizard's Thicket #10 (Individual/Entity) is a restaurant located in Columbia, South Carolina. The Department conducted inspections on May 26, 2016, July 22, 2017, and April 20, 2017. The Individual/Entity has violated the South Carolina Retail Food Establishment Regulation as follows: failed to properly cool, cooked time/temperature control for safety foods; and failed to use effective methods to cool, cooked time/temperature control for safety foods.

Action: The Individual/Entity is required to: operate and maintain the facility in accordance with the requirements of all applicable regulations, including S.C. Regs. 61-25; and pay a civil penalty in the amount of eight hundred dollars (**\$800.00**).

79) Order Type and Number: Consent Order 2017-206-03-070  
Order Date: October 23, 2017  
Individual/Entity: **The Dixie Pig**  
Facility: The Dixie Pig  
Location: 2007-101 Celanese Road  
Rock Hill, SC 29732  
Mailing Address: Same  
County: York  
Previous Orders: None  
Permit Number: 46-206-03295  
Violations Cited: S.C. Code Ann. Regs. 61-25

Summary: The Dixie Pig (Individual/Entity) is a restaurant located in Rock Hill, South Carolina. The Department conducted inspections on April 11, 2016, April 6, 2017, and June 2, 2017. The Individual/Entity has violated the South Carolina Retail Food Establishment Regulation as follows: failed to properly cool, cooked time/temperature control for safety foods.

Action: The Individual/Entity is required to: operate and maintain the facility in accordance with the requirements of all applicable regulations, including S.C. Regs. 61-25; and pay a civil penalty in the amount of eight hundred dollars (**\$800.00**).

80) Order Type and Number: Consent Order 2017-206-03-078  
Order Date: October 23, 2017  
Individual/Entity: **El Cancun**  
Facility: El Cancun  
Location: 1244 Cherry Road  
Rock Hill, SC 29730  
Mailing Address: Same

County: York  
Previous Orders: None  
Permit Number: 46-206-00234  
Violations Cited: S.C. Code Ann. Regs. 61-25

Summary: El Cancun (Individual/Entity) is a restaurant located in Rock Hill, South Carolina. The Department conducted inspections on September 15, 2016, May 22, 2017, and May 30, 2017. The Individual/Entity has violated the South Carolina Retail Food Establishment Regulation as follows: failed to maintain proper holding temperatures of time/temperature control for safety foods.

Action: The Individual/Entity is required to: operate and maintain the facility in accordance with the requirements of all applicable regulations, including S.C. Regs. 61-25; and pay a civil penalty in the amount of eight hundred dollars **(\$800.00)**.

81) Order Type and Number: Consent Order 2017-206-02-015  
Order Date: October 27, 2017  
Individual/Entity: **Green Lettuce**  
Facility: Green Lettuce  
Location: 19 Augusta Street  
Greenville, SC 29601  
Mailing Address: Same  
County: Greenville  
Previous Orders: None  
Permit Number: 23-206-10621  
Violations Cited: S.C. Code Ann. Regs. 61-25

Summary: Green Lettuce (Individual/Entity) is a restaurant located in Greenville, South Carolina. The Department conducted inspections on September 9, 2016, May 17, 2017, and May 24, 2017. The Individual/Entity has violated the South Carolina Retail Food Establishment Regulation as follows: failed to maintain proper holding temperatures of time/temperature control for safety foods.

Action: The Individual/Entity is required to: operate and maintain the facility in accordance with the requirements of all applicable regulations, including S.C. Regs. 61-25; and pay a civil penalty in the amount of eight hundred dollars **(\$800.00)**.

82) Order Type and Number: Consent Order 2016-211-07-003  
Order Date: October 27, 2017  
Individual/Entity: **Ladson Seafood**  
Facility: Ladson Seafood  
Location: 9543 Highway 78  
Ladson, SC 29456  
Mailing Address: Same  
County: Charleston  
Previous Orders: 2015-206-07-054 (\$800.00)  
Permit Number: 10-211-00053  
Violations Cited: S.C. Code Ann. Regs. 61-25

Summary: Ladson Seafood (Individual/Entity), located in Ladson, South Carolina, is a seafood market. The Department conducted an inspection on August 17, 2016. The Individual/Entity has violated the South Carolina Retail Food Establishment Regulation as follows: failed to maintain proper holding temperatures of time/temperature control for safety foods.

Action: The Individual/Entity is required to: operate and maintain the facility in accordance with the requirements of all applicable regulations, including S.C. Regs. 61-25; and pay a civil penalty in the amount of nine hundred fifty dollars **(\$950.00)**.

83) Order Type and Number: Consent Order 2016-206-03-105  
Order Date: October 30, 2017  
Individual/Entity: **Café Taylor**  
Facility: Café Taylor  
Location: 126 South Main Street  
Lancaster, SC 29720  
Mailing Address: Same  
County: Lancaster  
Previous Orders: None  
Permit Number: 29-206-01448  
Violations Cited: S.C. Code Ann. Regs. 61-25

Summary: Café Taylor (Individual/Entity) is a restaurant located in Lancaster, South Carolina. The Department conducted inspections on September 20, 2016, November 15, 2016, and November 21, 2016. The Individual/Entity has violated the South Carolina Retail Food Establishment Regulation as follows: failed to clean the physical facilities as often as necessary to keep them clean.

Action: The Individual/Entity is required to: operate and maintain the facility in accordance with the requirements of all applicable regulations, including S.C. Regs. 61-25; and pay a civil penalty in the amount of two hundred dollars **(\$200.00)**.

84) Order Type and Number: Consent Order 2017-206-03-103  
Order Date: October 31, 2017  
Individual/Entity: **Dairy Queen/Orange Julius**  
Facility: Dairy Queen/Orange Julius  
Location: 100 Columbiana Circle, Suite 1252  
Columbia, SC 29212  
Mailing Address: Same  
County: Lexington  
Previous Orders: None  
Permit Number: 32-206-05595  
Violations Cited: S.C. Code Ann. Regs. 61-25

Summary: Dairy Queen/Orange Julius (Individual/Entity), located in Columbia, South Carolina, is a restaurant. The Department conducted inspections on August 18, 2016, August 24, 2016, and July 28, 2017. The Individual/Entity has violated the South Carolina Retail Food Establishment Regulation as follows: failed to remove dead or trapped birds, insects, rodents, and other pests from control devices and the premises at a frequency that prevents their accumulation, decomposition, or the attraction of pests.

Action: The Individual/Entity is required to: operate and maintain the facility in accordance with the requirements of all applicable regulations, including S.C. Regs. 61-25; and pay a civil penalty in the amount of two hundred dollars **(\$200.00)**.

### **Onsite Wastewater Enforcement**

85)	<u>Order Type and Number:</u>	Consent Order 17-08-OSWW
	<u>Order Date:</u>	October 27, 2017
	<u>Individual/Entity:</u>	<b>Pamela Cunningham</b>
	<u>Facility:</u>	Pamela Cunningham
	<u>Location:</u>	505 Bryson Drive Simpsonville, SC 29681
	<u>Mailing Address:</u>	Same
	<u>County:</u>	Greenville
	<u>Previous Orders:</u>	None
	<u>Permit Number:</u>	None
	<u>Violations Cited:</u>	S.C. Code Ann. Regs. 61-56

Summary: Pamela Cunningham (Individual/Entity) owns property located in Simpsonville, South Carolina. The Department conducted a complaint investigation on July 21, 2017, and observed the discharge of wastewater to the ground surface. The Individual/Entity has violated the South Carolina Onsite Wastewater Systems (OSWW) Regulation as follows: failed to ensure that no septic tank effluent or domestic wastewater or sewage was discharged to the surface of the ground without an appropriate permit from the Department.

Action: The Individual/Entity is required to immediately stop the discharging of all septic effluent or domestic wastewater or sewage to the ground; immediately remove all drainage pipes that are not connected to an approved wastewater disposal system; and ensure that the residence located at 505 Bryson Drive remains vacated until it can be connected public sewer system.

\* Unless otherwise specified, "Previous Orders" as listed in this report include orders issued by Environmental Affairs Programs within the last five (5) years.

Date: December 7, 2017

To: S.C. Board of Health and Environmental Control

From: Bureau of Emergency Medical Services and Trauma

Re: Public hearing for Notice of Final Regulation for Proposed New Regulation 61-118, *South Carolina Stroke Care System*, Document 4760

## I. Introduction

The Bureau of Emergency Medical Services (“EMS”) and Trauma proposes the attached Notice of Final Regulation for R.61-118, *South Carolina Stroke Care System*. Legal authority for this regulation resides in S.C. Code Sections 44-61-610 *et seq.*, which requires the Department of Health and Environmental Control (“Department”) to promulgate regulations establishing a process of application and recognition of acute care hospitals wishing to be recognized as Stroke Centers within South Carolina. The Administrative Procedures Act, S.C. Code Section 1-23-120(A) requires General Assembly review of this promulgation.

## II. Facts

1. The General Assembly passed the Stroke System of Care Act of 2011 (“Act”) requiring the Department to promulgate regulations establishing a process of application and recognition of acute care hospitals wishing to be recognized as Stroke Centers within the state. The Department must post a list of all recognized Stroke Centers on its website and distribute the list to all licensed Emergency Medical Services (“EMS”) agencies. The Act further requires the Department to establish a statewide stroke registry for the collection and analysis of stroke care by acute care hospitals within South Carolina. Additionally, the Act requires the Department to adopt and distribute a nationally recognized, standardized stroke-triage assessment tool. The Department must post this assessment tool on its website and distribute it to all licensed EMS agencies.
2. The Department had a Notice of Drafting for the new regulation published in the April 28, 2017, *South Carolina State Register*.
3. The Department had a Notice of Proposed Regulation published in the September 22, 2017, *State Register*. The Department received sixty (60) public comments by the October 23, 2017, close of the comment period. Attachment B presents a summary of public comments received and Department responses.
4. The Department completed an internal review of the regulation November 21, 2017. All appropriate Department personnel have reviewed the regulation.
5. The Stroke Advisory Council met with Department representatives and stakeholders October 13, 2017. The meeting gave Department representatives an opportunity to discuss the proposed regulation and any suggested changes.
6. After consideration of all timely received comments, staff has made substantive changes to regulatory text of the Notice of Proposed Regulation approved by the Board at the September 7, 2017, Board meeting and published in the September 22, 2017, *State Register*. Descriptions of the changes appear in Attachment B, Summary of Public Comments and Department Responses.

## III. Request for Approval

Based on the public hearing and documents herein, the Bureau of EMS and Trauma requests the Board to grant a finding of need and reasonableness of the attached Notice of Final Regulation in order to proceed with submission to the General Assembly.



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Robert Wronski  
Chief of EMS and Trauma



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Shelly Bezanson Kelly, J.D.  
Director of Health Regulation

Attachments:

- A. Notice of Final Regulation
- B. Summary of Public Comments and Department Responses

## ATTACHMENT A

Document No. 4760

### DEPARTMENT OF HEALTH AND ENVIRONMENTAL CONTROL CHAPTER 61

Statutory Authority: 1976 Code Sections 44-61-610 et seq.

#### **Synopsis:**

The Department of Health and Environmental Control (“Department”) has promulgated this new regulation to execute the requirements of the Stroke System of Care Act of 2011, S.C. Code Sections 44-61-610 et seq. (Supp. 2016). The regulation establishes a process of application and recognition of acute care hospitals wishing to be recognized as stroke centers within South Carolina. The regulation establishes a statewide stroke registry for the collection and analysis of stroke care by acute care hospitals within the state. Additionally, the regulation adopts a nationally recognized, standardized stroke-triage assessment tool, posted on the Department’s website and distributed to all Emergency Medical Services (“EMS”) agencies licensed by the Department.

The Department had a Notice of Drafting published in the *State Register* on April 28, 2017.

#### Section-by-Section Discussion of Final Regulation:

TITLE: 61-113, South Carolina Stroke Care System

#### TABLE OF CONTENTS

The table of contents was added.

#### **Section 100. DEFINITIONS**

The definitions of 100.A Acute Care Hospital, 100.B Acute Stroke Ready Hospital, 100.C Certificate of Recognition, 100.D Certificate Holder, 100.E Comprehensive Stroke Center, 100.F Department, 100.G Emergency Medical Services, 100.H Primary Stroke Center, 100.I Recognition, 100.J State Stroke Registry Database, 100.K Stroke Advisory Council, 100.L Stroke Care System, 100.M Stroke Center, 100.N Stroke Patient, 100.O Telemedicine-Enabled Stroke Center, and 100.P Thrombectomy-Capable Stroke Center were added.

#### **Section 200. RECOGNITION PROCESS**

Section 200 delineates the process for recognition by the Department.

#### **Section 201. Eligibility for Recognition**

Section 201 allows for any acute care hospital certified or accredited as a Stroke Center by the Joint Commission or other nationally recognized organization to apply to the Department for recognition.

#### **Section 202. Application Process**

Section 202 outlines the process for application to the Department for recognition and delineates the required documentation therein.

#### **Section 203. Recognition Renewal**

Section 203 states that recognition expires upon expiration of current disease-specific certification or accreditation by the Joint Commission or other nationally recognized organization.

**Section 204. Recognition Levels**

Section 204 delineates the available levels of recognition and states that the Department may adopt and recognize any certification or accreditation by nationally recognized organizations that may become available at a later date.

**Section 205. Recognition**

Section 205 delineates the Department's process for recognizing hospitals under the requirements of this regulation.

**Section 206. Process of Re-recognition**

Section 206 delineates the process for acute care hospitals seeking recognition after previously, but no longer, being a Certificate Holder.

**Section 300. CERTIFICATE OF RECOGNITION REQUIREMENTS**

Section 300 outlines the Certificate of Recognition requirements.

**Section 301. Issuance and Terms of the Certificate of Recognition**

Section 301 delineates the terms of certificates indicating Recognition and states that a Certificate of Recognition is not assignable or transferable.

**Section 302. Exceptions to the Standards**

Section 302 was added to grant the Department authority to make exceptions to these standards when the health and safety of patients will not be compromised and the standard is not specifically required by statute.

**Section 400. STATEWIDE SYSTEM OF STROKE CARE**

Section 400.A requires licensed EMS providers to utilize the South Carolina Stroke Assessment and Triage tool identified by the Department in the SC EMS Protocol "Suspected Stroke." Section 400.B requires that after July 1, 2019, licensed EMS providers to utilize the SC EMS Protocol "Adult Stroke Patient Destination Determination by Stroke Center Capability" for transport of acute stroke patients to the closest stroke center within a specified timeframe of onset of symptoms unless one (1) or more exceptions listed therein applies.

**Section 500. STATE STROKE REGISTRY DATABASE**

Section 500 outlines the requirements of submission to the State Stroke Registry Database.

**Section 501. Data Submission**

Section 501 requires Certificate Holders to participate in the State Stroke Registry Database and outlines the required schedule for submission.

**Section 502. Inclusion and Exclusion Criteria**

Section 502 states that patient inclusion and exclusion criteria will be established by the Department under the guidance of the Stroke Advisory Council and maintained in the State Stroke Registry Guidelines.

**Section 503. Confidentiality Protection of Data and Reports**

Section 503 requires that reports show only general information and shall not identify any protected information or hospital information.

**Section 600. SEVERABILITY**

Section 600 was added to allow the regulation to remain valid should it be determined that a portion of the regulation be invalid or unenforceable.

**Section 700. GENERAL**

Section 700 was added to allow the Department to utilize best practices to manage any conditions not covered by these regulations.

**Instructions:** Add new Regulation 61-118, South Carolina Stroke Care System, to Chapter 61 regulations in the South Carolina Code of Regulations.

~~Indicates Matter Stricken~~

Indicates New Matter

**Text:**

61-118. South Carolina Stroke Care System.

TABLE OF CONTENTS:

SECTION 100 – DEFINITIONS

SECTION 200 – RECOGNITION PROCESS

201. Eligibility for Recognition

202. Application Process

203. Recognition Renewal

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SECTION 300 – CERTIFICATE OF RECOGNITION REQUIREMENTS

301. Issuance and Terms of the Certificate of Recognition

302. Exceptions to the Standards

SECTION 400 – STATEWIDE SYSTEM OF STROKE CARE

SECTION 500 – STATE STROKE REGISTRY DATABASE

501. Data Submission

502. Inclusion and Exclusion Criteria

503. Confidentiality Protection of Data and Reports

SECTION 600 – SEVERABILITY

SECTION 700 – GENERAL

SOUTH CAROLINA STROKE CARE SYSTEM

SECTION 100

DEFINITIONS

A. Acute Care Hospital. A hospital licensed by the Department that has facilities, medical staff and all necessary personnel to provide diagnosis, care, and treatment of a wide range of acute conditions, including injuries.

B. Acute Stroke Ready Hospital (“ASRH”). Disease-specific certification by the Joint Commission or other nationally recognized organization at the level of Acute Stroke Ready Hospital and recognized by the Department.

C. Certificate of Recognition. A document issued by the Department to an Acute Care Hospital indicating the Department has recognized the Acute Care Hospital as a Stroke Center at a stroke Recognition level appearing in Section 204 of this regulation.

D. Certificate Holder. An Acute Care Hospital with a current Certificate of Recognition from the Department and with whom rests the ultimate responsibility for compliance with this regulation.

E. Comprehensive Stroke Center (“CSC”). Disease-specific certification by the Joint Commission or other nationally recognized organization at the level of Comprehensive Stroke Center, and recognized by the Department.

F. Department. The South Carolina Department of Health and Environmental Control (“DHEC”).

G. Emergency Medical Services (“EMS”). The treatment and transport of patients in crisis health situations occurring from a medical emergency or from an accident, natural disaster, or similar life-threatening situation, through a system of coordinated response and emergency medical care.

H. Primary Stroke Center (“PSC”). Disease-specific certification by the Joint Commission or other nationally recognized organization at the level of Primary Stroke Center, and recognized by the Department.

I. Recognition. The formal determination by the Department that an Acute Care Hospital is certified or accredited to provide a particular level of stroke care services.

J. State Stroke Registry Database. The stroke data collection and evaluation system, also known as “Get With The Guidelines-Stroke,” designed to include, but not be limited to, stroke studies, patient care and outcomes, and severity of illness in the State. The data elements collected in the State Stroke Registry Database are determined by the Department with collaboration from the Stroke Advisory Council.

K. Stroke Advisory Council (“SAC”). Stroke System of Care Advisory Council created pursuant to S.C. Code Section 44-61-650(A).

L. Stroke Care System. An organized statewide system of care for the Stroke Patient, including the Department, EMS providers, hospitals, inpatient rehabilitation providers, and other providers who have agreed to participate in coordinating stroke care services and who have been recognized by the Department in an organized statewide system.

M. Stroke Center. A hospital recognized by the Department as certified or accredited by the Joint Commission or another nationally recognized organization that provides disease-specific certification or accreditation for stroke care, and a hospital meeting the definition for Telemedicine-Enabled Stroke Centers.

N. Stroke Patient. An individual being treated for a sudden brain dysfunction due to a disturbance of cerebral circulation. The resulting impairments include, but are not limited to, paralysis, slurred speech, and/or vision loss. Strokes can be classified as either ischemic or hemorrhagic.

O. Telemedicine-Enabled Stroke Center. A center utilizing interactive audio, video, and other electronic media for the purpose of diagnosis, consultation, or treatment of acute stroke. Telemedicine-Enabled Stroke

Centers offer telemedicine services for stroke on a twenty-four (24) hour, seven (7) day per week basis, have a transfer plan in place with at least one (1) PSC or CSC, and report a minimum of four (4) performance measures of their choosing, at least two (2) of which are clinical measures related to clinical practice guidelines, quarterly to the State Stroke Registry Database.

P. Thrombectomy-Capable Stroke Center (“TSC”). Disease-specific certification by the Joint Commission or other nationally recognized organization at the level of Thrombectomy-Capable Stroke Center, and recognized by the Department.

## SECTION 200

### RECOGNITION PROCESS

#### **201. Eligibility for Recognition**

A. Any Acute Care Hospital certified or accredited as a stroke center by the Joint Commission or other nationally recognized organization that provides disease-specific certification or accreditation for stroke care may apply to the Department for Recognition.

B. In order to maintain Department Recognition, an Acute Care Hospital shall maintain certification or accreditation as a stroke center by the Joint Commission or from an equivalent process by another nationally recognized organization that provides disease-specific certification or accreditation for stroke care.

C. Any facility that no longer meets nationally recognized, evidence-based standards as a stroke center, or no longer possesses disease-specific certification or accreditation for stroke care, shall notify the Department within thirty (30) business days as required by S.C. Code Section 44-61-640(D), and surrender the Certificate of Recognition to the Department.

#### **202. Application Process**

A. An Acute Care Hospital seeking Recognition shall submit to the Department a completed application. The application shall include the applicant’s attestation assuring that the contents of the application and other requested documents are accurate and true. The application shall be authenticated as follows:

1. If the applicant is an individual or a partnership, the application shall be signed by the owner(s);
2. If the applicant is a corporation, nonprofit organization, or limited liability company, the application shall be signed by two (2) of its officers;
3. If the applicant is a governmental unit, the application shall be signed by the head of the governmental unit having jurisdiction.

B. The application shall set forth the full name and address of the Acute Care Hospital for which the Recognition is sought, and the name and address of the owner of the facility in the event that his or her address is different from that of the facility. In the event of a change in ownership of the Acute Care Hospital, the Department shall be notified in writing within forty-eight (48) hours of the change.

C. The application shall include a copy of the full accreditation report by the Joint Commission or other nationally recognized organization at the level of Recognition requested.

D. The application shall include signed copies of agreements to allow the Department to access data submitted to the State Stroke Registry Database.

E. The Department may require additional information evidencing the applicant's ability to comply with this regulation.

### **203. Recognition Renewal**

A. Recognition shall expire upon expiration of current disease-specific certification or accreditation for stroke care by the Joint Commission or other nationally recognized organization.

B. To maintain Recognition, an Acute Care Hospital shall renew its recognition upon renewal of current disease-specific certification or accreditation for stroke care as required by the Joint Commission or other nationally recognized organization.

C. The application process for renewal shall follow the same process outlined in Section 202.

### **204. Recognition Levels**

A. Recognition Levels by the Department for Stroke Centers include Acute Stroke Ready Hospital ("ASRH"), Primary Stroke Center ("PSC"), Thrombectomy-Capable Stroke Center ("TSC"), and Comprehensive Stroke Center ("CSC").

B. As nationally recognized, disease-specific certification or accreditation programs become available at more comprehensive and less comprehensive levels, the Department may adopt and recognize those hospitals that have achieved the certification or accreditation.

### **205. Recognition**

A. Recognition is based upon Department review and verification of the application and its supporting documents, as indicated in Section 202. Failure to meet recognition requirements, misrepresentation, and/or false information provided by the hospital is grounds for denial.

B. Upon approval, the Department will issue a Certificate of Recognition to the hospital denoting the Recognition level. The Department will also place the name of the hospital and its corresponding Recognition level on the Department's website.

### **206. Process of Re-recognition**

An Acute Care Hospital seeking Recognition after previously, but no longer, being a Certificate Holder shall follow the Recognition procedures outlined in Section 202.

## SECTION 300

### CERTIFICATE OF RECOGNITION REQUIREMENTS

#### **301. Issuance and Terms of the Certificate of Recognition**

A. The issuance of a Certificate of Recognition does not guarantee adequacy of individual care, treatment, procedures, and/or services, personal safety, fire safety, or the well-being of any patient.

B. A Certificate of Recognition is not assignable or transferable.

C. A Certificate of Recognition shall be effective for a specific Stroke Center at a specific physical location. A Certificate of Recognition shall remain in effect until expiration of current disease-specific certification or accreditation.

### **302. Exceptions to the Standards**

The Department may grant exceptions to standards of this regulation if it determines that the health, safety, and well-being of the patients will not be compromised and such standard is not specifically required by statute.

## SECTION 400

### STATEWIDE SYSTEM OF STROKE CARE

A. Licensed EMS providers shall establish a stroke assessment and triage system that incorporates the South Carolina Stroke Assessment and Triage tool identified by the Department and located in the SC EMS Protocol “Suspected Stroke.”

B. After July 1, 2019, licensed EMS providers shall utilize SC EMS Protocol “Adult Stroke Patient Destination Determination by Stroke Center Capability” for transport of acute Stroke Patients to the closest Stroke Center within a specified timeframe of onset of symptoms unless one (1) or more of the following exceptions apply:

1. It is medically necessary to transport the patient to another hospital;

2. It is unsafe or medically inappropriate to transport the patient directly to a Stroke Center due to adverse weather or ground conditions;

3. Transporting the patient to a Stroke Center would cause a shortage of local EMS resources (defined as no resources available for longer than thirty (30) minutes in a reasonable response area) and air transport is unavailable;

4. No appropriate Stroke Center is able to receive and provide stroke care to the Stroke Patient without undue delay; or

5. Before transport of a patient begins, the patient requests to be taken to a particular hospital that is not a Stroke Center or, if the patient is less than eighteen (18) years of age or is not able to communicate, such request is made by an adult member of the patient’s family or a legal representative of the patient.

## SECTION 500

### STATE STROKE REGISTRY DATABASE

#### **501. Data Submission**

A. All Certificate Holders shall participate in the State Stroke Registry Database by:

1. Submitting data identified by the Department to the State Stroke Registry Database; and

2. Signing and completing agreements to allow the Department to access data submitted to the State Stroke Registry Database.

B. The Certificate Holder shall ensure that all data is submitted to the State Stroke Registry Database quarterly, as outline below. The Certificate Holder shall ensure that the data entered in the State Stroke Registry Database is accurate and complete.

<u>Admission Period</u>	<u>Due Date</u>
January – March	July 1
April – June	October 1
July – September	January 1
October – December	April 1

**502. Inclusion and Exclusion Criteria**

Patient inclusion and exclusion criteria shall be established by the Department under the guidance of the Stroke Advisory Council and maintained in the State Stroke Registry Guidelines.

**503. Confidentiality Protection of Data and Reports**

Information that identifies individual patients shall not be disclosed. Reports that do not contain protected health information or any identifiable information may be generated and distributed. Such reports shall not identify any protected information or hospital information.

SECTION 600

SEVERABILITY

In the event that any portion of this regulation is construed by a court of competent jurisdiction to be invalid or otherwise unenforceable, such determination shall in no manner affect the remaining portions of this regulation, and it shall remain in effect, as if such invalid portions were not originally a part of this regulation.

SECTION 700

GENERAL

Conditions which have not been addressed in this regulation shall be managed in accordance with best practices as interpreted by the Department.

**Fiscal Impact Statement:**

There is no anticipated additional cost by the Department or State government due to any requirements of this regulation. There are no external costs anticipated.

**Statement of Need and Reasonableness:**

The following is based on an analysis of the factors listed in 1976 Code Section 1-23-115(C)(1)-(3) and (9)-(11):

#### DESCRIPTION OF REGULATION:

Purpose: The purpose of this new regulation is to establish a process of application and recognition of acute care hospitals wishing to be recognized as Stroke Centers within the State, encourage Stroke Centers to submit data to the State Stroke Registry Database, and establish a statewide stroke assessment and triage tool for EMS. This regulation seeks to direct EMS agencies to transport stroke patients to appropriate facilities to treat stroke patients in a timely manner.

Legal Authority: 1976 Code Sections 44-61-610 et seq.

Plan for Implementation: The DHEC Regulation Development Update (accessible at <http://www.scdhec.gov/Agency/RegulationsAndUpdates/RegulationDevelopmentUpdate/>) provides a summary of and link to this new regulation. Additionally, printed copies are available for a fee from the Department's Freedom of Information Office. Department personnel will take appropriate steps to inform the regulated community of the regulation and any associated information.

#### DETERMINATION OF NEED AND REASONABLENESS OF THE REGULATION BASED ON ALL FACTORS HEREIN AND EXPECTED BENEFITS:

Pursuant to S.C. Code Section 44-61-640(B) (Supp. 2016), the Department must establish a process to recognize acute care hospitals as Stroke Centers within the State, given an applicant is certified as a Stroke Center by the Joint Commission or another nationally recognized organization that provides disease-specific certification or accreditation for stroke care. Furthermore, the Department must supply a list of these recognized Stroke Centers to EMS agencies and create and provide a statewide stroke assessment-triage tool. This regulation establishes the process of recognition of Stroke Centers, requires the use of a statewide stroke assessment-triage tool and transport plan, and outlines the process to participate in the State Stroke Registry Database.

#### DETERMINATION OF COSTS AND BENEFITS:

Implementation of this regulation will not require additional resources. There is no anticipated additional cost to the Department, State government, or the regulated community due to any inherent requirements of this regulation.

#### UNCERTAINTIES OF ESTIMATES:

None.

#### EFFECT ON ENVIRONMENT AND PUBLIC HEALTH:

The regulation seeks to support the Department's goals relating to protection of public health through the anticipated benefits highlighted above. There is no anticipated effect on the environment.

#### DETRIMENTAL EFFECT ON THE ENVIRONMENT AND PUBLIC HEALTH IF THE REGULATION IS NOT IMPLEMENTED:

There is no anticipated detrimental effect on the environment. If the regulation is not implemented, transport of stroke patients within the State by EMS agencies will be up to the determination and agreements between EMS agencies and the local hospitals regardless of their certification as Stroke Centers.

**Statement of Rationale:**

This new regulation addresses the requirements of the Stroke System of Care Act of 2011. This regulation is necessary to establish a process of application and recognition of acute care hospitals wishing to be recognized as Stroke Centers within South Carolina. The regulation establishes a State Stroke Registry Database for the collection and analysis of stroke care by acute care hospitals within the State. Finally, the regulation adopts a nationally recognized, standardized stroke-triage assessment tool to be posted on the Department's website and distributed to all EMS agencies licensed by the Department.

**ATTACHMENT B  
SUMMARY OF PUBLIC COMMENTS AND DEPARTMENT RESPONSES**

**Document No. 4760**

**R.61-118, South Carolina Stroke Care System**

**As of the October 23, 2017, close of the Notice of Proposed Regulation Comment period:**

NAME	SECTION	PUBLIC COMMENT	DEPARTMENT RESPONSE
<p>1. Sudha Xirasagar, MBBS, PhD, University of South Carolina, Arnold School of Public Health</p>	<p>General</p>	<p>I wanted to place my comment in view of my research interest and engagement in stroke research. On reviewing the document it is heartening to note that it is very comprehensive and wide-ranging in its scope to maximize stroke care improvement in South Carolina. Notably it streamlines the process of stroke center certifications, maintenance of status, and South Carolina citizens' awareness and use of the appropriately qualified and equipped hospitals for suspected stroke. Importantly, the proposed regulation appears to advance the cause of stroke patients significantly by providing clear guidelines to EMS personnel in decisions about transporting suspected stroke patients to the most appropriate hospital taking into account hospitals' stroke capability, geographic distance and other logistics. This change should make a significant improvement in the speed of treatment of stroke patients, especially with clot busting agents for which speed is the essence, concurrent with expertise and equipment at the treating center.</p> <p>All regulatory aspects of prehospital- and hospital- stroke care appear to be very admirably accounted for in developing this proposed regulatory document. This speaks very highly of the expertise of SC DHEC officials involved in drafting it as well as their close partnership with neurology and other specialists. The proposed regulation takes full advantage of the current state-of-art of the science and evidence on stroke care, and appears likely, in my opinion, to position South Carolina's stroke care system to greatly enhance stroke care and outcomes for its citizens.</p>	<p><u>Acknowledged.</u></p>
<p>2. Edward Bender, Dir. of Regulatory Affairs, S.C. Hospital Assn.</p>	<p>General</p>	<p>SCHA commends the Department staff and the Stroke Advisory Council for their diligent and thorough work on this proposed regulation. SCHA has long advocated for the adoption of a stroke care system in South Carolina and is pleased we are getting closer to its implementation. As the Department is aware, stroke is one of the leading causes of death amongst South Carolina residents. SCHA looks forward to continuing its partnership with DHEC and others in the health care community to reduce stroke-related deaths in South Carolina.</p> <p>Patient safety and patient care are SCHA's top priority in the implementation of a statewide stroke care system. SCHA believes its comments on this proposed regulation will, if adopted, allow Acute Care Hospitals in South Carolina to deliver the best possible outcomes for their stroke patients.</p>	<p><u>Acknowledged.</u></p>

<p>3. Edward Jauch, MD MS</p>	<p>General</p>	<p>The cornerstone of all my comments firmly centers on the welfare of patients experiencing a stroke. Anchoring my beliefs and activities is the fundamental question “<i>What is best for this stroke patient?</i>” Due to the neurologic sequelae of stroke, patients often cannot advocate for themselves in a time of acute distress. Thus, it is incumbent upon all of us who create stroke systems of care to ensure that a robust consistent system is in place which optimize the opportunity for recovery and survival for <i>all</i> stroke patients.</p> <p>To preface my ending comments, I will highlight the actual science of stroke and evidence-based stroke best practice that are both patient-centered.</p> <ul style="list-style-type: none"> <li>• Decades of data unequivocally demonstrate stroke patient outcomes are singularly tied to time to treatment – namely reperfusion, both Door to Needle time (DTN) for IV alteplase, and Door to Recanalization (DTC) for endovascular therapies (EVT). Even minutes of delay decreases the patient’s chance for recovery – <i>Time is Brain</i>.</li> <li>• Expeditious reperfusion remains the cornerstone for acute stroke treatment and is <i>the</i> standard of care nationwide <ul style="list-style-type: none"> <li>○ Alteplase remains a level 1 level of evidence (LOE) recommendation for all eligible stroke patients.</li> <li>○ Recently, for patients with large vessel occlusions (LVO), EVT therapy is also a LOE 1 recommendation.</li> </ul> </li> <li>• The intervention with maximal impact for <i>all</i> stroke patients is the in-hospital continuum of team-based stroke care during the acute stroke hospitalization. Research and experience demonstrate this team consists of expert Emergency Department care, vascular neurology, dedicated stroke unit care, early recovery assessment, social work and mental health service, and EVT and neurocritical care expertise when appropriate. This team-based approach provides patients with the best opportunity for making the most complete recovery possible after acute stroke.</li> <li>• Practice matters in all walks of life as it does in caring for critically ill patients. Focusing care for special populations which require team-based interventions in an institution with the expertise and the volume of cases improves patient outcomes, including trauma and organ transplantation. The association of hospital case volume and patient outcomes has been clearly demonstrated for all forms of stroke as well – the more you do, the better the <i>patient</i> outcomes.</li> <li>• Procedural volumes also impact outcomes. The cardiac literature demonstrates that mortality and major adverse cardiac events decrease as physician operator volumes increase. Similarly, the orthopedics literature demonstrates that patients treated by providers with lower caseload volumes had higher rates of mortality</li> </ul>	<p><u>Acknowledged.</u></p>
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NAME	SECTION	PUBLIC COMMENT	DEPARTMENT RESPONSE
		<p>following total knee arthroplasty. For neuroendovascular procedures, focusing on ruptured and unruptured intracranial aneurysms, increased procedural volume was associated with fewer adverse outcomes and lower in-hospital mortality. Similar correlations of outcomes to procedural volumes of mechanical thrombectomy in acute stroke are seen in recent clinical trials. (personal communication with Dr. J Mocco, Professor Neurosurgery, Mount Sinai Beth Israel, New York City, NY)</p> <ul style="list-style-type: none"> <li>• The relatively small change in transportation destination for those relatively few patients with suspected LVO strokes will not overwhelm the capacities of the CSC and soon-to-be CSC in the state. Based on current treatment guidelines it is estimated that roughly 10% of all acute stroke patients have an LVO eligible for thrombectomy.</li> </ul> <p>The founding principles of 2011 South Carolina Stroke Bill focused on the patient and incorporated best practices at that time. Similar to trauma systems now requiring American College of Surgeon certification, the stroke bill required independent third-party accreditation of hospitals based on their stroke capabilities, thus avoiding unverified self-attestation. This process is the same in almost every state in the US. Similarly, the SC stroke bill called for uniform prehospital stroke assessment and triage founded on guideline-based current best practice. Exceptions from adhering to the protocol are exactly the same as in the current SC trauma regulations, medical issues dictate diversion from the protocol, and the patient always has the right to choose their hospital destination. Thus, the SC DHEC Stroke Advisory Committee, representing constituents from across the state, worked to create the proposed 2017 SC EMS Stroke Protocol. This clear, concise, consistent, and directed EMS tool and triage protocol designed to be implemented uniquely with regions of the state is arguably the most critical element in the <i>Stroke Chain of Survival</i>.</p> <p>By not making the stroke protocol similar to the current SC trauma regulations allows for inconsistent application of best practice, potentially harms patients, and will directly lead to preventable and unnecessary death and disability. <i>In reality, the proposed protocol changes very little of the existing EMS stroke protocol – only the small fraction of patients within a certain time period, within a certain distance of a CSC, and with a high likelihood of having a LVO would be affected. All other stroke patients would be triaged as we currently do to local Acute Stroke Ready Hospitals or Primary Stroke Centers across the state.</i></p> <p>In summary as you consider this proposal, ask yourself – what is best for this patient? What is best for your patient? What is best for your family member should they be this patient? Accepting anything less than the proposed regulation and protocol means we have failed to protect and serve our vulnerable stroke patients.</p>	

NAME	SECTION	PUBLIC COMMENT	DEPARTMENT RESPONSE
4. Yarley Steedly, American Heart Assn., American Stroke Assn.	General	<p>The Stroke Systems of Care Act of 2011 gives the Department of Health and Environmental Control (DHEC) the authority to establish a stroke system of care for the state of South Carolina which will address the needs of stroke patients from the pre-hospital care environment, to the hospital, and finally, rehabilitation.</p> <p>The critical components of any formally-recognized system of care for a specific disease state or condition must, at a minimum, include:</p> <ol style="list-style-type: none"> <li>1. Facility designation verification or recognition by an appropriate statewide regulatory agency.</li> <li>2. Triage assessment and transport protocols to the most appropriate certified hospital.</li> <li>3. Continuous evaluation and improvement of quality of care through utilization of a statewide registry.</li> </ol>	<u>Acknowledged.</u>
5. Harry Burns, YoungStroke, Inc.	General	<p>Hi, I am writing out of experience. I have been associated throughout the Carolinas with YoungStroke Inc. for a couple of years. When my late wife developed Dementia and MS, the information and guidance given me by this organization really assisted me in surviving one of the most difficult time of my life. Coaching and living with someone who suffered from mini strokes and changed our whole lifestyle. There needs to be more funding to educate people like myself and others with coping mechanisms. I am a health educator myself. However, things are different when it is your loved one that is directly affected. Please do not turn away from providing funding and resources to agencies that are working in the trenches to make a difference. Thanks for all you have done and prayerfully you will continue to do.</p>	<u>Acknowledged.</u>

<p>6. Nicole Phelix</p>	<p>General</p>	<p>At the age of 26, I was not expecting to face the life challenges that come with having a stroke. I suffered an Ischemic Stroke due to a Vertebral Artery Dissection (VAD) with no warning signs. My initial care was provided in the state of North Carolina as that was where I resided at the time of my stroke. I was transported between hospital settings there, as stroke and neurological care are limited across the U.S. as a whole. After recovering enough to be discharged from the hospital I was in, I was moved by my family to an acute inpatient rehabilitation center in South Carolina and have remained in this state to recover. While I realize young strokes are not seen as "common" as stroke is believed to be in older adults, I believe we can hold the protocol and medical professionals treating young stroke survivors to higher standards. There is limited access to information on young strokes, and this was something my family (and caregivers) were immediately faced with.</p> <p>The cause of my VAD remains unknown. I do not fault the medical professionals for this, but it is difficult for me to trust that it "will not happen again because it was a freak thing." Through completing my own research and listening to other young stroke survivors' stories, I have found confirmation that it is absolutely possible for me to face another stroke. While I try to continue living my daily life without this fear looming over me, I wish the medical staff treating me had more knowledge to base their prediction on. The impacts of surviving a stroke and carrying on daily life are far greater than one can imagine. I am fortunate enough to be walking without assistance again. I am able to talk, bathe, dress myself without issue. All of these came with time, but I am aware that I have made great progress in my recovery that other survivors are unable to make. My parents needed to make physical changes to their home upon my return from the rehabilitation center to suit my needs. The two referral options I had for neurologists in the area upon my discharge were 1:40 and 2 hours away from where I would be residing with my parents. This commute for follow-up care would seem daunting in any case, but this also meant additional cost/time to get to and from appointments. Vertigo symptoms made any transportation a nightmare for me. A ten minute car ride to my outpatient therapy appointments made me feel sick and exhausted enough, how could I be expected to travel several hours round-trip for necessary follow-up care?</p> <p>The financial burden brought by stroke is something no one can prepare for. My mother became my caregiver while my step-father continues to work. My family has provided me significant financial assistance while I have been out of work myself. These financial burdens have caused emotional distress in addition to the emotional recovery one needs to make when grieving the loss of identity, purpose, work, independence, etc. as a stroke survivor. I continue to wait on my recovery to dictate my future. My employment was terminated following the six month "marker" of me being out of my position due to my stroke and recovery. It has been two months since my employment ended and I am still waiting to hear a decision about my long-term disability claim. I am hopeful to return to work when the</p>	<p><u>Acknowledged.</u></p>
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NAME	SECTION	PUBLIC COMMENT	DEPARTMENT RESPONSE
		interfering symptoms subside, but until then I am without any income. The medical expenses accrued through treatment and rehabilitation continue to add up on top of my pre-stroke life expenses, and it has quickly become difficult to stay afloat. Implementing comprehensive care and making changes to the existing care is not only necessary, but truly life changing for those experiencing stroke.	
7. Ellen Debenham, MUSC	General	I would like to voice my support of this proposed regulation. This addresses the constant questions related to transfer of stroke patients and ensures patients will be triaged appropriately.	<u>Acknowledged.</u>
8. Dorothy Connor	General	<p>My name is Dorothy Connor and Stroke put a comma in my Life in the Fall of 2004. I experienced a Transient Ischemic Attack (TIA), and was diagnosed with uncontrollable Hypertension (HTN). I began holistic, healthy lifestyle changes under doctor's supervision with chiropractic care, massage therapy, healthier eating, and exercise. Despite my effort of healthy lifestyle changes, in 2008, I weighed 420 lbs. Then unfortunately, in 2009, I was diagnosed with Cerebrovascular Stroke which left me incapacitated for 6 months with right sided weakness and Pseudo tumor cerebra. After four years, I was able to return to my regular yet limited activities due to the invisible defects post stroke such as visual disturbances in one or both eyes, major cognition, restless leg syndrome (RLS), confusion, and emotional changes. Stroke has altered my life in many ways. Pre-stroke, I was married with a son and worked a full-time with part time job. I was a full-time nursing student. Due to the stroke, I became a divorced, single mom and dismissed from the nursing program, with two classes I would have become an LPN then pursue my Registered nursing degree. Also, I was released to early from my neurologist whom did not inform my PCP; therefore, my short and long-term insurance was discontinued immediately which caused major financial stress. I was out of the work force four years, upon my return, I was no longer able to work as a Certified Nursing Assistant and the nursing program became very challenging.</p> <p>My insurance was cancelled and I was not able to afford rehab/physical therapy nor medications. It was a very difficult and frustrating to find financial resources because the assistance used my previous gross pay as a guide and did not accept the new changes. This force me to self-pay for doctors' visits, medications, and seek labs with area churches.</p> <p>I wish someone had told me about: the relationship between the PCP and specialist; urgency of rehab; resources for follow-up (testing, finances); and support groups.</p> <p>If I could do one thing to make stroke care better, I would separate the heart and stroke entities. Stroke is a stand-alone entity which requires as much attention as heart conditions especially in younger generations.</p> <p>I appreciate the new regulation proposal for SC Stroke Care System. A stroke registry is desperately needed in the Stroke belt.</p>	<u>Acknowledged.</u>

NAME	SECTION	PUBLIC COMMENT	DEPARTMENT RESPONSE
		<p>This regulation will assist in gaining access to vital information for preventative stroke.</p>	
<p>9. Stacey B. Derrick</p>	<p>General</p>	<p>My name is Stacey Derrick and I am the daughter of a recent stroke survivor. In addition, I am a volunteer/advocate for the American Heart Association.</p> <p>The purpose of my letter today is to express my support of the proposed regulations for the South Carolina Stroke Systems of Care. Once implemented, this system will ensure that all South Carolinians receive the best care available, no matter where they are when suffering a stroke. <b>By doing so we put the needs of the patient first.</b></p> <p>In April of 2017, I received a frantic phone call from my mother...my father had suffered a stroke. During the trip to the hospital I envisioned what his life, our lives were now going to look like. I spent hurried moments trying to figure out how our family would care for a man who could no longer walk, talk, or function without constant care. Would I ever hear my father say, "I love you", again?</p> <p>Upon arriving at the hospital I was astounded at what took place over the hours and weeks after his stroke. My father was fortunate enough to be properly diagnosed and transported to a hospital that could administer the appropriate care, medications, treatment, and therapy within a critical timeframe. My father came home a month later with the ability to walk, talk, and care for himself.</p> <p>My fathers story is the perfect example of how destination protocols, stoke certifications, and a participating stroke registry hospital, have a significant impact on outcomes. These circumstances allowed him to prevent brain loss and prevent permanent disability.</p> <p>Again, I strongly urge you to make sure the regulations maintain their integrity by protecting patients first. Please support the Stroke Systems of Care and its' proposed regulations for South Carolina. By doing so, you will be reducing the chances of long-term disability and deaths in stroke patients, allowing for mandated destination protocols, increase the visibility of stroke certified hospitals, and improving outcomes through stroke registries.</p>	<p><u>Acknowledged.</u></p>
<p>10. Robert Adams</p>	<p>General</p>	<p>I am writing to show strong support for the Stroke System of Care law now being considered. Shortly after coming to SC in 2007 I served a Chair of the DHEC committee that recommended and put forth the first stroke bill, which was passed over Ms. Haley's veto.</p> <p>We really need organization at all levels. I set up the REACH Tele-stroke system which has not treated over 14,000 patients in over 25 sites. I have not been involved in this new effort but I fully support it as the next step in making our state patient friendly and stroke un-friendly so to speak.</p>	<p><u>Acknowledged.</u></p>

NAME	SECTION	PUBLIC COMMENT	DEPARTMENT RESPONSE
11. Todd Gallati, CEO, Trident Health	General	On behalf of Trident Health (Trident Medical Center and Summerville Medical Center), we welcome the opportunity to comment on these proposed regulations. While we generally support the process of application and recognition of stroke centers, we do have suggestions regarding the proposed regulations.	<u>Acknowledged.</u>
12. Tanya Turan, MUSC	General	I strongly support this regulation. Stroke is one of the leading causes of death in South Carolina and SC has consistently ranked as one of the states with the highest stroke mortality in the country. Many years ago, this was due to a lack of stroke expertise within the state. However, the expertise to care for complicated cases of severe strokes now exists in SC. The current challenge is to ensure that residents of SC get appropriate access to that expertise. Implementation of a standardized stroke-triage assessment tool is critical to get the most serious stroke cases to the hospitals that can adequately care for them. EMS should not transport patients with suspected stroke to centers lacking the expertise to treat them. Doing so would result in a delay in appropriate treatment resulting in more severe strokes and higher stroke mortality. SC should recognize hospitals that can provide expert stroke care and establish a system of care that routes stroke patients to those centers for the good of the residents of this state.	<u>Acknowledged.</u>
13. Ann Marie McPherson	General	<p>I am writing to you about the process and application initiative being presented to recognize stroke centers within SC and creating a standardized assessment tool necessary to compile and collect data from stroke patients entering the system. As of now, it is my understanding nothing like this exists and as a caregiver of a husband who suffered a carotid dissection in January of 2014, I feel this is extremely important.</p> <p>My husband Rob, was a 50 year old man with no prior health history. No high cholesterol, no high blood pressure and no blunt trauma. In other words, A Young Stroke Survivor. That evening presented with symptoms, called 911 and my husband was transferred to Hilton Head Hospital. Was treated, received TPA but was not then transferred to a Acute Care Hospital(recognized and accredited in stroke care). We were told later, that if he had been transferred, they may have been able to perform surgery and we may have been looking at a totally different outcome. As of now, 30 percent of his brain is dead and the clot STILL remains. As you can image, our family is devastated. We have four children and our life will be forever changed. Rob can no longer work and is on disability.</p> <p>I am asking(pleading) with the board to please consider what is being presented. The recognition, the registry, the assessment and triage tool and the protocol to transfer stroke patients to the nearest acute center is of utmost importance. The collection of the data is critical for continuing to provide the best care to stroke patients(timing is critical). It is also my understanding, that SC and the southern belt has an increased incidence of young stroke. I plead with you, please look at and consider these actions noted. Please place the needs of patients and their families first.</p>	<u>Acknowledged.</u>

NAME	SECTION	PUBLIC COMMENT	DEPARTMENT RESPONSE
14. Sharon Webb, SE Neurosurger y and Spine	General	<p>I am writing to show my support for the proposed regulation that addresses the requirements of the Stroke System of Care Act. I think all of us on the stroke council put a lot of effort and time into this over these past months because we believe this is going to help dramatically change stroke care in SC. This is going to allow us to collect data and take a real look at stroke care in this state and help us recognize issues and help direct further efforts. This is also going to allow for EMS to adopt a standardized stroke-triage assessment tool and be able to triage patients with suspected large vessel occlusions to the most appropriate centers as quickly as possible which will ensure the best outcomes for the patients. This regulation puts the patients first which is why we are all here and working together – to make sure that all people of SC get the best care they can. I applaud the efforts of everyone who helped to make this regulation possible and for putting patients and not politics first.</p>	<u>Acknowledged.</u>
15. Mahmodu Rayes, GHS	General	<p>Those proposed regulations are in line with current guidelines and foster patient centered practices and lead to better outcomes. I am in agreement.</p>	<u>Acknowledged.</u>
16. Lewis Porche	General	<p>My name is Lewis Porche. I am the executive producer and CEO of Builders of Our Heritage community television here in Charleston South Carolina. On December 19, 2016 my wife Wanda suffered a stroke.</p> <p>Up until then, I'm afraid to say, that I didn't think very much about the changes that this kind of event can make in the life of a small family like ours. It was rather ironic that this experience came upon us when it did because we had been making plans to attend an important conference in Florida concerning Stroke awareness around the same time that my bride of 25 years had the attack.</p> <p>I was already her primary care giver because of prior health complications that we have to deal with due to type 2 diabetes. Even though I am grateful to say that my wife's recovery has been nothing less than a miracle, it should go without saying that I am personally aware of the great need that our state has for more assistance in the area of educational exposure about this disease, as well as information about such things as prevention, current treatments &amp; therapy as well as the often devastating financial considerations .</p> <p>This subject is extremely important particularly to the minority community. So of course we stand with YOUNGSTROKE inc. <u>Inc.</u> in making this appeal for more assistance in the areas mentioned above in every way possible. In the upcoming year our organization hopes to do more to help to bring more light on this important and very serious subject.</p>	<u>Acknowledged.</u>

NAME	SECTION	PUBLIC COMMENT	DEPARTMENT RESPONSE
17. Linda Weatherspoon, Advocate for Stroke	General	<p>My family was effected by my stroke in many ways. During the time I was in a coma for 18 days the doctors had called my family three different times. At MUSC they thought I would not make it. I had an aneurism and stroke. Jeff said my bleed continued on the left side to the point it had pushed that part of the brain to the other side. Another time the lung collapsed. They could not remove the intubated tube down by throat. When they did I could not breathe for too long.</p> <p>I have 3 sisters in NC. One owned a hat shop. When this happened she closed it so she could take care of my 3 younger children in school...10, 11 and 15 in MB, SC so Jeff (my husband) stay in MUSC. My other 2 sisters are teachers in NC. They both lost a lot of time to stay at MUSC and cost of a hotel in Charleston. My son Larry Bond was a manager in Florida. Because of the stroke he lost his house, car, job and girlfriend!!! He and my husband did not leave me alone at MUSC. They did not believe them when the 3 Neurologist said I would not make it or be a vegetable if I did not die. My husband was in the middle of PA school at Horry Tech...he lost that too.</p> <p>I was a high school art teacher after I received a Master Degree and was on my 2nd year. I lost a job that I was good at and lost the knowledge and job...I still study but do not retain it with aphasia. I could not get social security because I was not their 2 years and did not work the last few years. (I was studying to get my master during those years and taking care of my mother with lung cancer). The rules took my income and my insurance. My mother had passed away 6 months before my stroke.</p> <p>MUSC told my family that the birth control or a inherited clotting might have caused my stroke in 2007. My husband never went to my doctor prior to my stroke. He knew I had a small adrenal gland tumor that the doctor checked every 6 months and uncontrollable high blood pressure. We did not know that the adrenal gland was causing me endocrine problems (10 out of 12) that probably would have be corrected seeing an endocrinologist or a veterinarian! The tumor did not grow but it caused Cushing syndrome that was misdiagnosed and caused spiked high blood pressure. I did not find this out until 2010 and almost had another stroke! <i>Personally I think my doctor knew he misdiagnosed me and his attorney probably told him to wait two years because the statute of limitations is 2 years in SC!</i> The 5th doctor looked at me in 10 minutes that I probably had Cushing syndrome but had to do the right test that I had not had! At that time I did not know or understand any of this...I learned in 2014 reading my doctor records and I was mad! As soon as the kidney doctor that identified Cushing removed my adrenal gland all the edema, round face, high blood pressure and hump on my back went away! I did not have high blood pressure for 5 years trying to control! Now I am an advocate of Cushing syndrome praying that this will not happen to someone else!!! If I had died they would not have known that Cushing syndrome caused it!!! Every day I wonder how many people this caused their stroke and death for endocrine problems and strokes!!!</p>	Acknowledged.

NAME	SECTION	PUBLIC COMMENT	DEPARTMENT RESPONSE
		<p>I did not know what tPA is. My job paid for most of the care. I did have speech therapy. I was disappointed that the 30 year nurse kept telling me that what I was saying was wrong??? I could not see the first words but the 2nd words...I would tell her and she would say...<i>"Your brain does not work like that."</i> I told Jeff and Larry that I did not like that. I could not explain why. I found out like a lot other stroke survivors are dyslexic as a result of stroke!!! I have a stroke group that cannot talk for 20 years! I believe that dyslexic therapy needs more study and awareness of Cushing and dyslexia after strokes!</p> <p>Larry and Jeff tried to get me out of MUSC to Wachamaw so they could be closer to my daughters in school and my sisters back to work. Wachamaw would not accept me if I had to be "tied down." At that time I was aggressive and did not recognize my family or that I had a stroke...I was afraid and thought they were bad people! Larry sat on my arm several nights to keep me from pulling out my pick lines so they could prove that they would not have to tie me up.</p> <p>My family tried to find a book about strokes family could help a stroke survivor when they leave the hospital. They did not find one. My mother in law retired and the first thing she did was published a book called <i>"Can I Paint in Heaven?"</i> that would help stroke survivor families information that they did to help me. Yes I had to learn my ABC's again and convinced that Art Therapy caused my left and right brain synapses way faster than they would have been without it I teach Art Therapy to stroke survivors for that reason...I do not get the real severe stroke survivors that I planned to. I have 10 people...regulars that are stroke and cancer survivors'...they help me more than I help them.</p>	
18. B.V. Skipper, Sister a stroke victim	General	More public information regarding benefits. Not aware of benefits! Thanks for the opportunity.	<u>Acknowledged.</u>
19. Lidia Yamada, MUSC	General	This regulation is such an important step towards improvement in patient access to advanced stroke care. Working in a comprehensive stroke center, we frequently see an unnecessary delay in the arrival of stroke patients to get the appropriate treatment because they are sent initially to other centers that do not have the level of acute care that is available here. For those who are candidates for interventions such as thrombectomy, being able to get to the right hospital in the shortest period of time can be the difference between quality of life and disability, life or death.	<u>Acknowledged.</u>
20. Sandi Merriam	General	I had two strokes, one on each side of my brain! The details of that event, at the end of an ordinary day of house cleaning, food preparation, and grocery shopping, are not the story. The story is my subsequent learning curve. Fortunately I recognized the numbness in my tongue and the fact that my body was pulling me to the left were not normal and could be the effects of a stroke. Because I had been to hear Amy Edmonds, CEO and founder of YoungStroke, the first and only American advocacy organization	<u>Acknowledged.</u>

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		<p>formed to specifically address the unmet needs of young adult stroke survivors and their caregivers, I knew I need to get to an emergency room that was prepared to evaluate my condition in case this WAS a stroke. I remembered from her remarks that Grand Strand Medical Center was in the process of preparing to be certified as a stroke evaluation facility. Within seconds of arriving at GSMC I was being evaluated and tests were underway for my treatment. As a result of that excellent response the effects of my strokes were mild.</p> <p>I share this story to answer the following questions:</p> <ul style="list-style-type: none"> <li>• WHAT IF I had not been informed of the fact that not all hospital emergency rooms are equipped and qualified to address the evaluation and treatment of strokes?</li> <li>• HOW OFTEN are patients admitted to emergency rooms ill equipped to respond to a stroke?</li> <li>• WHY ARE ALL HOSPITALS EMERGENCY ROOMS NOT EQUIPPED TO HAVE THE TRAINING TO RESPOND TO A STROKE?</li> </ul> <p>Over the past year, I have spoken with friends, family, and civic organizations about many aspects of my own stroke. I am grateful to have had good insurance that allowed me to obtain access to the MUSC stroke center. I am grateful that my stroke outcome has left me with side effects that I can manage. But as a retired educator I believe that we must “KNOW WHAT IS KNOWN!”</p> <ul style="list-style-type: none"> <li>• We must claim our dubious health ranking as the #1 state for strokes under 30 years of age.</li> <li>• All hospitals must be required to prepare their emergency room triage teams to evaluate and treat stroke patients.</li> <li>• Our state DHEC statistics on strokes like mine (elderly 68 year old white female) are not being reported to supply a clear picture of the work that must be done to address our situation.</li> <li>• How many stroke patients are transferred from one hospital emergency room to a different hospital without being logged as a stroke patient? I am concerned with skewed statistics and the monetary aspect of hospital reporting.</li> </ul>	
21. Kolby Redd, Ph.D, MHA, USC School of Medicine, Dept. of Neurology	General	<p>I would like to contribute comments in support of the SC Stroke Care System regulation. This regulation is important in the state of SC due to the high volume of stroke patients that present around the state in a given day. Delaying treatment increases the chance of the patient having long-term or permanent disability and death. It is imperative that EMS personnel are aware of qualified stroke treatment centers so they can transport the patient to the nearest qualified facility and minimize the lost time to treatment. The facilities that participate in a stroke registry have been proven, scientifically through research, to have better patient outcomes than hospitals who do not participate within the registry. Thus, making this regulation important to pass and implement state-wide.</p>	Acknowledged.

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22. Robin Nazon, American Heart Assn.	General	I have had several family and friends who have suffered strokes and I have witnessed the effects of expedient, stroke specific, care that helps the patient survive and recover from the devastating effects of the stroke. Having a set protocol that is easy to follow will get the patient the proper care in the fastest time which will mitigate the effects of the stroke.	<u>Acknowledged.</u>
23. Neel Shah, GHS	General	I support the current version as it will have a significant patient centered impact as well as cost savings and more efficient health care.	<u>Acknowledged.</u>
24. Wayne Feng, MUSC	General	I am supporting this proposed regulation which will be good for these stroke patients in the south carolina. hopefully with this new regulation, SC can get out of stroke belt or buckle of stroke belt.	<u>Acknowledged.</u>
25. Amanda Cotter	General	I am in full support of the regulation as it is currently written.	<u>Acknowledged.</u>
26. Amy Edmunds, YoungStroke, Inc.	General	<p>South Carolina has a unique burden of stroke among young adults under 65. The needs of this young adult population only benefits from the proposed by-pass protocols.</p> <p>According to DHEC:</p> <ul style="list-style-type: none"> <li>- Stroke resulted in 4,923 hospitalizations for African Americans in South Carolina in 2015. Of these, 52 percent were less than 65.</li> <li>- Stroke resulted in 7,628 hospitalizations for women in South Carolina in 2015. Of these, 35 percent were less than 65 years old.</li> <li>- Stroke resulted in 15,059 hospitalizations in South Carolina in 2015. Of these, 38 percent were less than 65.</li> </ul> <p>Delays in stroke treatment due to misdiagnosis and transfers adversely impacts this emerging population in ways distinguished from older stroke patients. For example, too many young stroke patients are saddled with an extended period of disability over their lifespan. They also suffer economic devastation of loss earnings and loss independence when such delays pose barriers to treatment.</p> <p>As a young stroke survivor, I personally experienced the consequence of delay. For me, the delay of the EMT team resulted in my missing the four hour window of opportunity to receive tPA. Now, as founder of YoungStroke, Inc., a South Carolina based 501c3 patient advocate organization, and as a globally elected member of the Board of Directors of the World Stroke Organization, my support of South Carolina's Comprehensive Stroke System is grounded upon a well-rounded perspective.</p>	<u>Acknowledged.</u>
27. Leonardo Bonilha, MUSC	General	I strongly support the current version, and I would like to stress the patient-centered positive impact that it will have.	<u>Acknowledged.</u>

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28. James Vick, MUSC Admin.	General	Code Sections 44-61-610 et seq. (Supp. 2016). This proposed regulation is incredibly important for the health and well-being of our state and citizens. Having worked with stroke patients from the Emergency Room to the recovery phase it is critical that patients are identified and triaged to the best level of care. By providing care that is patient-centered and focused we can improve the outcomes of patients throughout the state and the burden of disability placed on the state and loved ones.	<u>Acknowledged.</u>
29. Swaroop Pawar, Greenville Memorial Hospital	General	Extremely supportive of the proposed regulation, not only will it benefit patient care however it will also improve patient outcomes going forward. Fully endorse support regarding the proposed relation.	<u>Acknowledged.</u>
30. Stacia Bell	General	These proposed regulations are pertinent to making sure all patients in South Carolina experiencing a stroke receive the best care possible. I completely agree with the following: 1. Destination protocols are important, because time lost to appropriate treatment is brain lost. Delaying treatment increases the chance of long-term or permanent disability and death. 2. Hospitals should be transparent about their level of recognized stroke certification. There should not be confusion from the public, first responders, and/or other hospitals about where the qualified stroke treatment hospitals are. 3. Research shows that hospitals participating in a stroke registry have better patient outcomes than hospitals that do not participate in a registry. Protocols are important as they serve as a documented basis for ensuring the best possible outcome for patients by requiring that patients be taken to an appropriate stroke certified hospital. I do believe hospitals should be required to be transparent about their certification and any lapse in their certification. Patients should be confident in their hospital's ability to treat stroke and by meeting stroke center certification hospitals are ensuring they are capable. A stroke registry will provide opportunities for quality improvement and other transformational opportunities in stroke care in South Carolina. As the grand-daughter of two stroke survivors I firmly believe that hospitals have an obligation to do what's right by the patient. To put market-share second and what's best for the patients first.	<u>Acknowledged.</u>
31. Christine Holmstedt, MUSC	General	I am writing in support of the regulation proposed to the Stroke System of Care Act of 2011. It is absolutely vital that stroke patients displaying symptoms consistent with large vessel occlusion are brought to a JC Accredited Comprehensive Stroke Center, particularly if the center is within a reasonable distance (30 minutes). Patient outcomes are directly linked to speed to revascularization and inter-hospital transfers negatively impact door to revascularization times. Additionally, JC CSC hospitals have faster door to needle times, faster door to groin punctures, experienced nursing and physicians to care for neuro critical patients all leading to improved outcomes and reduced disability. We must think about patients and their families. Few simple points... Increased volumes = improved outcomes Time is brain Patients first!!	<u>Acknowledged.</u>

<p>32. Karen Musclow</p>	<p>General</p>	<p>On February 17, 2017 my daughter suffered a vertebral dissection causing an ischemic stroke. She was 26 years old. Thank God she was in the right place at the right time for this unfortunate life-altering event. But that was just the beginning of her current recovery. Upon her discharge from the hospital we needed to have her close by me in Myrtle Beach as I would be her caregiver. We thank God we are less than 15 minutes away from an award winning, accredited inpatient rehab which she was accepted into. After being discharged she was treated with tremendous out-patient care, although her recover was always pushing the therapists to trying new and different things because of her age and determination. She was then discharged partly because she had reached her insured limits of 20 visits. So then the "unstructured" recovery began.</p> <p>Thus began my feelings of inadequacy as a caregiver. All I had to help me understand what I needed to do and to help her, was what we learned from the physical stand point. There isn't much out there on the emotional and financial burdens young stroke survivors face. I suggested to her at least for her emotional health she look into a support group, as I have never had a stroke so I cannot understand her frustrations, thoughts and fears. The information we were provided with didn't give her a lot of choices for support groups that could really fit her need...remember she is in her twenties. She will have to deal with this event for the rest of her life. I thank God she is a very strong, determined young woman.</p> <p>I am thankful I am able to help my daughter. My husband is a very supportive step-father to my daughter, so financially I am in a position to be the caregiver my daughter needs at this time of her life. I had recently moved to South Carolina seven months prior to my daughter having her stroke and had just begun to search for full-time employment about three weeks before. Again, in the right place at the right time yes, putting my life on hold wasn't even a question for us. I then think of others who are not so fortunate. Those who do not live in close proximity of a hospital to treat someone who is having a stroke; or are first responders even recognizing stroke symptoms if the person is young; what if someone isn't close to family that can bear the emotional and financial burden of being caregivers; are there stroke survivors in rural areas that are missing out on these therapeutic opportunities because of location or services that are not available to them due to insurance or financial restrictions. Then our own needs for education on what life is like after having a stroke at a young age, what can caregivers do to help with the emotional healing for their family member/friend who has had a stroke;</p> <p>I believe the more information that would be gathered in a registry database from all hospitals that treat ALL stroke patients would help bring attention to so many young stroke survivors and the need for services for this particular group along with the realistic numbers of all stroke patients and their demographics. My daughter's care at the inpatient and out-patient rehab facilities that are accredited facilities was fantastic. Again, we were very blessed that this facility was close to our home, the home in which my daughter had to relocate to as she continues to rehab because</p>	<p><u>Acknowledged.</u></p>
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		<p>she could not financially hold on to her home that she had established in North Carolina.</p> <p>I believe numbers tell a story of reality. From these numbers I feel so much can be gained from educating the public and EMTs who may be the first point of contact with a potential stroke patient (so many have a mindset of strokes happen to "old people" only) to the services needed after discharge from inpatient and/or outpatient therapy. Day to day living for a stroke survivor and caregiver is complicated enough. There isn't enough time in the day some days to research information, educate ourselves or search and advocate for services that are or should be available to a stroke survivor. The daily activities of a survivor can be very limited. A stroke can caused a brain injury, so many of the deficits are not visible, but they most certainly can be there causing a hindrance in daily activities of a stoke survivor. From a caregiver's perspectives I wish I had more resources to help me help my daughter with educating myself; helping her with the emotional thoughts and fears; and helping her apply for needed assistance in different areas of her life now and in her future.</p>	
33. Francee Levin, Advocate	General	It is very important to pass the regulations as stated. It can literally be a matter of life and death, since time is so short, and the effects can be so devastating.	<u>Acknowledged.</u>
34. Lauren Hays, GHS	General	This is a great initiative to improve the outcome of our patients!	<u>Acknowledged.</u>
35. Sanjeev Sivakumar, GHS	General	<p>The following comment pertain to the Stroke System of Care Act of 2011, S.C. Code Sections 44-61-610 et seq. (Supp. 2016). I am in support of this proposal. This proposal allows for recognition of Joint commission or other national organization-accredited stroke centers, which will ensure highest quality of acute stroke care to the residents of SC. Making the designation information publicly available facilitates rapid triage of stroke patients and would allow to minimize disparities in stroke care. For example, the regulation would mandate that patients meeting pre-specified clinical criteria for stroke secondary to large arterial occlusion, to be triaged and taken to a comprehensive stroke center. The regulations are in in keeping with the recommendations of American heart-American stroke association and evidence base showing improved outcomes among such stroke patients. The regulation would take us closer to a goal of making SC a national leader in stroke system of care.</p>	<u>Acknowledged.</u>
36. Shelly Ozark, MD	General	This proposed legislation is a long time in coming in a state with one of the highest rates of stroke death and disability. Stroke is a condition where time equals brain and 2 million brain cells per minute. This legislation could save literally thousands of lives per year. Stroke will affect each of us, either as patients, loved ones, or friends. We all want the best chance possible for our patients and ourselves. Lives will be saved if this legislation is confirmed.	<u>Acknowledged.</u>

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37. Craig McCoy, CEO, Bon Secours St. Francis Health System	General	<p>We recognize that cerebrovascular disease is a major cause of death and disability in the state of South Carolina and applaud SC DHEC for its ongoing effort to improve stroke care. We believe that encouraging hospitals statewide to seek stroke certification will elevate the level of care we provide. Collecting and sharing data on patients with stroke will allow us to direct education and to constantly improve.</p>	<u>Acknowledged.</u>
38. Amy Splittergerber, M.Ed., Exec. Dir., SC Alliance of YMCAs	General	<p>For more than 150 years, SC YMCAs have been dedicated to improving the lives and health of our communities. In South Carolina, the 21 YMCA Associations work each day to promote healthy communities through programs and policy. In our policy efforts, we advocate for evidence-based policy changes to support youth development, healthy living and social responsibility. Our current policy agenda includes the SC Stroke Systems of Care Registry. The following recommendations are proven to identify disparities which exist in stroke patient treatment and identify areas where treatment can be improved for better patient outcomes including survival and quality of life for stroke victims. The Stroke Systems of Care Act of 2011 gives the Department of Health and Environmental Control (DHEC) the authority to establish a stroke system of care for the state of South Carolina which will address the needs of stroke patients from the pre-hospital care environment, to the hospital, and finally, rehabilitation.</p> <p>The critical components of any formally-recognized system of care for a specific disease state or condition must, at a minimum, include:</p> <ol style="list-style-type: none"> <li>1. Facility designation verification or recognition by an appropriate statewide regulatory agency.</li> <li>2. Triage assessment and transport protocols to the most appropriate certified hospital.</li> <li>3. Continuous evaluation and improvement of quality of care through utilization of a statewide registry.</li> </ol> <p>In closing, the SC Alliance of YMCAs supports the work DHEC is doing for cardiovascular care in South Carolina, in partnership with the SC Chapter of the American Heart Association. We are pleased to see the regulation supports the citizens of our state with a comprehensive stroke system of care. The state has a heavy burden of stroke costing more than \$800 million in hospitalization costs in 2015. We look forward to continuing the great partnership we have developed with DHEC and the Bureau of EMS in developing and implementing a comprehensive stroke system of care that will benefit all South Carolinians.</p>	<u>Acknowledged.</u>

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39. Yarley Steedly, American Heart Assn., American Stroke Assn.	200	<u>Stroke Facility Designation</u> The purpose of the state independently verifying a hospital's stroke certification (Acute Stroke Ready Hospital, Primary Stroke Center, or Comprehensive Stroke Center) and making the information readily available to the public and EMS providers, is to remove any potential confusion about a hospital's capability and certification to treat stroke patients as determined by circumstance and severity of symptoms. AHA/ASA fully supports DHEC's plan for recognition of certified stroke hospitals.	<u>Acknowledged.</u>
40. Amy Splittergerber, M.Ed., Exec. Dir., SC Alliance of YMCAs	200	The purpose of the state independently verifying a hospital's stroke certification (Acute Stroke Ready Hospital, Primary Stroke Center, or Comprehensive Stroke Center) and making the information readily available to the public and EMS providers, is to remove any potential confusion about a hospital's capability and certification to treat stroke patients as determined by circumstance and severity of symptoms. The SC Alliance of YMCAs fully supports DHEC's plan for recognition of certified stroke hospitals.	<u>Acknowledged.</u>
41. Edward Bender, Dir. of Regulatory Affairs, S.C. Hospital Assn.	201	There are hospitals in South Carolina that do not receive their accreditation from Joint Commission or another nationally recognized accrediting body. These nationally recognized accrediting bodies may not offer stroke certification to hospitals they do not accredit. As a result, these hospitals would be unable to obtain a stroke certification. SCHA recommends the regulation allow for an appropriate level of recognition for those hospitals that are denied the opportunity for stroke certification because they do not participate in accreditation from a nationally recognized accrediting body.	<u>Not adopted.</u> S.C. Code Section 44-61-640(B) requires the Department to recognize acute care hospitals as primary stroke centers that are certified as primary stroke centers by the Joint Commission or another nationally recognized organization that provides disease-specific certification or accreditation for stroke care.
42. Edward Bender, Dir. of Regulatory Affairs, S.C. Hospital Assn.	201	The "Stroke System of Care Act of 2011" required the Department to acknowledge hospitals that are stroke enabled through telemedicine. <i>See</i> S.C. Code Ann. § 44-61-620(3); S.C. Code Ann. § 44-61-640(A); S.C. Code Ann. § 44-61-660(A)(1). This proposed regulation does not appear to allow for recognition of hospitals solely based on stroke capability through telemedicine. Currently, there are over thirty stroke-enabled hospitals through telemedicine in South Carolina. Is it the Department's intention to also require those hospitals that are stroke-enabled through telemedicine to obtain a separate stroke certification before receiving patients transported by EMS? SCHA recommends the regulation follow the Stroke System of Care Act of 2011 and allow hospitals that are stroke-enabled through telemedicine to receive an appropriate level of recognition within the Stroke System of Care.	<u>Adopted.</u> Section 100 was updated to define Telemedicine-Enabled Stroke Centers which will allow these centers to be incorporated into the SC EMS Stroke Triage and Transport Protocol.

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43. Todd Gallati, CEO, Trident Health	204	The proposed recognition categories in this section does not incorporate facilities that can perform endovascular thrombectomy (EVT) services. Trident Medical Center offers these EVT services to our patients 24/7, 365 days per year and we believe this service offers a distinct difference in care from Primary Stroke Centers. This is evident with the Joint Commission as well as they are currently implementing a process for hospitals to obtain certification as an EVT capable facility.	<u>Adopted.</u> Section 204.A has been amended to include Thrombectomy-Capable Stroke Centers as a level of recognition.
44. Lauren McCauley, RN, Piedmont Medical Center	205	<b>Facility designation verification or recognition by an appropriate statewide regulatory agency.</b> There should not be any confusion on the part of patients, EMS, or the general public about which hospitals are capable of treating a stroke patient appropriately and using the most current evidence based practices. I support DHEC’s plan for recognition of certified stroke hospitals. The end result will be more hospitals certified so that patients don’t bypass their institution. This will have a positive impact on the quality of care provided across the State.	<u>Acknowledged.</u>
45. Lauren McCauley, RN, Piedmont Medical Center	400	<b>Triage assessment and transport protocols to the most appropriate certified hospital.</b> Transporting a stroke patient to the most appropriate hospital allows for rapid treatment of the event and potentially decreases the disability that patient may experience, improving their outcome, and decreasing the costs of treatment. The inclusion of transport protocols ensures consistent care across the state. I appreciate the fact that this is included.	<u>Acknowledged.</u>
46. Todd Gallati, CEO, Trident Health	400	The proposed flowchart draft directs EMS to transport stroke patients with a certain presentation (Race score 4 or greater, onset < 7hr) to a CSC if within 30 minutes travel time. With IV tPA and EVT treatments making up the vast majority of treatments available to stroke patients today, and knowing that time is brain tissue, we believe it is in the best interest of patient care to combine “EVT capable facilities” with “CSC’s” when determining transport destination. Under these proposed rules, a patient could have a stroke at Charleston Southern University and be taken 29 minutes to MUSC (CSC) when they could have been transported to Trident Medical Center (EVT capable PSC), and benefited from the same intervention options in only 3 minutes! The flowchart in general as well as the asterisk in the “local medical option” section at the bottom creates ambiguity and will lead to many more stroke patients than intended to be transported greater distances than necessary. With a new category of EVT capable facilities being implemented, this proposed new process to license stroke hospitals in South Carolina, and the limited number of primary stroke centers and comprehensive stroke centers in the state, it would seem reasonable to also consider a transition period for these regulations. At a minimum, if the EMD destination rules (Section 400) are deemed necessary, implementation should be delayed until 2021. This will give time for the EVT category to form and for facilities the time necessary to choose their level of care and seek the time consuming and expensive certifications.	<u>Clarified.</u> Section 400.B has been amended to require licensed EMS providers to utilize SC EMS Protocol “Adult Stroke Patient Destination Determination by Stroke Center Capability” after July 1, 2019. This amendment will give hospitals the necessary time to become accredited under the Joint Commission’s forthcoming Thrombectomy Capable designation. Additionally, Section 204.A has been amended to include Thrombectomy-Capable Stroke Centers as a level of recognition.

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47. Mark Sims, Grand Strand Medical Center	400	<p>Stroke System of Care Act of 2011, S.C. Code Sections 44-61-610 et seq. (Supp. 2016). We had two representatives attend the DHEC Stroke Committee meeting on 10/12/17. At this meeting, members stated the verbiage in the proposed regulation would allow for local EMS providers to have the latitude to send the patients to healthcare facilities with thrombectomy capabilities. I am asking for clarification this will indeed be the case, as we are the only healthcare facility in our region that has this capability to treat stroke patients with a RACE score &gt; or = to a 4. We also know that the Joint Commission will be releasing new stroke designations in January 2018 that will include a Thrombectomy Capable Stroke Center - TSC. This designation will allow those facilities with this capability to treat patients with a RACE score &gt; or = to a 4. We would respectfully ask that this designation be adopted in the proposed regulations in January 2018.</p>	<p><u>Clarified.</u> Section 400.B has been amended to require licensed EMS providers to utilize SC EMS Protocol “Adult Stroke Patient Destination Determination by Stroke Center Capability” after July 1, 2019. This amendment will give hospitals the necessary time to become accredited under the Joint Commission’s forthcoming Thrombectomy Capable designation. Additionally, Section 204.A has been amended to include Thrombectomy-Capable Stroke Centers as a level of recognition.</p>
48. John Absher, MD, FAAN, GHS Neurosciences	400	<p>The following comments pertain to the Notice of Proposed Regulation, Stroke System of Care Act of 2011, S.C. Code Sections 44-61-610 et seq. (Supp. 2016). I strongly support the proposed regulation, which would continue to recognize hospital stroke capabilities (through JCAHO accreditation, mostly) in order to assure that SC residents receive the best possible care for stroke. In locations with a Comprehensive Stroke Center (CSC), the proposed regulation would mandate that patients who meet specific criteria easily ascertained in the field (i.e., a RACE score &gt;4 for detecting large vessel occlusion, within 7 hours from last known normal, and within 30 minutes of a CSC — patients who assuredly need a high level of stroke care), will be taken to a CSC. Exceptions do apply, such as in the case of medically unstable patients, and patient choice is honored, should a patient elect to divert to a different facility. New stroke research findings will require updates in the algorithm, as necessary. The proposed regulation is based on AHA and Brain Attack Coalition recommendations, and I believe, puts the patient's best interest above local politics and the economics of hospital competition. My career spans the introduction of tPA into stroke care, and extensive quality measure development and dissemination experience working with the American Academy of Neurology. When I first began practice in SC about 17 years ago, we were ranked 49th among states in our "stroke death rate." Over the years, remarkable improvements in stroke care have occurred, and I see the proposed regulation as yet another step in the right direction. We are making tremendous progress in stroke care in SC, the latest example being the proposed regulation embodied in the Stroke System of Care Act. Thank you.</p>	<p><u>Acknowledged.</u></p>

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49. Jimmy Hiott, CEO, Colleton Medical Center	400	As a rural facility in South Carolina there are significant concerns with the suggested protocols/rules. The EMS destination protocols/rules are not acceptable. Bypassing TPA or thrombectomy facilities is not good for patient care. Either eliminate these or delay implementation until 2021, giving facilities time to choose the level of care desired and to seek certifications, which will be time consuming and costly.	<u>Clarified.</u> Section 400.B has been amended to require licensed EMS providers to utilize SC EMS Protocol “Adult Stroke Patient Destination Determination by Stroke Center Capability” after July 1, 2019. This amendment will give hospitals the necessary time to become accredited under the Joint Commission’s forthcoming Thrombectomy Capable designation. Additionally, Section 204.A has been amended to include Thrombectomy-Capable Stroke Centers as a level of recognition.
50. Marc Chimowitz, MUSC	400	I am in strong agreement with the standardized stroke-triage assessment protocol. There have been tremendous life saving breakthroughs in acute stroke care over the past 3 years with the strong evidence that endovascular (surgical) treatments are much more effective than medical therapy for acute ischemic stroke. This treatment is only available at those hospitals with the expertise and manpower to deliver this care 24 hrs a day. Patients with acute stroke who meet the criteria for that treatment are best served if they can be transported to hospitals that can provide this care as soon as possible after the onset of stroke. The new proposal provides a triage protocol to do just that and, if approved, will save lives and prevent disability for acute stroke patients in SC. These proposals are based on AHA and Brain Attack Coalition recommendations, and put the patients above local politics. I trust that the legislature will make the best decision for patients in approving this proposal.	<u>Acknowledged.</u>
51. Patrick Bosse, Neuroscience Service Line Director, Roper St. Francis Healthcare	400	As drafted, EMS must bypass Stroke Centers capable of safely caring for most acute patients in favor of Comprehensive Stroke Centers (CSC’s). This verbiage restricts practices, and does not take into consideration unique ways in which organizations are collaborating on behalf of their communities to improve outcomes by reducing time to treatment.  Please reference the *Local Medical Control section on the bottom of the enclosed protocol. While we are aware that at the last state stroke meeting the back-lines edits were rejected, we would urge the Bureau to finalize this protocol inclusive of these strike-throughs thereby allowing transport to the closest ASRH, PSC or CSC for the reasons further described below.	<u>Clarified.</u> Section 400.B has been amended to require licensed EMS providers to utilize SC EMS Protocol “Adult Stroke Patient Destination Determination by Stroke Center Capability” after July 1, 2019. This amendment will give hospitals the necessary time to become accredited under the Joint Commission’s forthcoming Thrombectomy Capable

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		<p>Both Roper Hospital and Bon Secours St. Francis Hospital are Joint Commission credentialed Primary Stroke Centers (PSC's) and in this past year have partnered with MUSC, the only CSC in the state, to improve our community's access to advanced stroke treatments. MUSC provides a daily call team (consisting of a physician and a rad tech) to RSFH to treat Large Vessel Occlusions (LVO's) with mechanical thrombectomy. "Time is Brain" and we have expedited care to patients by taking the patient to the closest thrombectomy center and bringing the expertise to the patient. Additionally, it establishes an outpost in West Ashley where a busy and growing region of the LowCountry can be quickly routed for advanced care. This relationship was established because, jointly, it was felt that this was a better way to provide optimal stroke care in our community. This collaboration is intended to support the American Stroke Association's care guidelines, FAST. However, the drafted language will make receiving stroke care in our community anything but fast as time will be sacrificed with unnecessary transport. As written, this protocol will mandate EMS bypass quality PSC's including Roper Hospital and Bon Secours St. Francis Hospital, which utilize the physicians from the CSC.</p> <p>Consideration should be given to the impact this will have on MUSC, the only CSC. Additional patients would be routed to MUSC; however, with the low incidence rate for thrombectomy, few would be candidates. These patients can and should be routed to the closest center to receive optimal care, while at the same time decompressing the stress on South Carolina's only Level I Trauma Center.</p> <p>Finally, please consider that in 2018, The Joint Commission will establish thrombectomy capable designation for Stroke Centers performing these interventions. Facilities must achieve a minimum volume of thrombectomies in order to obtain and maintain this designation. As the proposed language will prohibit EMS triage to facilities like Roper and Bon Secours St. Francis Hospitals, this will restrict our ability to obtain such designation. Consequently, in the absence of volume, our teams will not be able to maintain proficient skill sets.</p> <p>Ultimately, this is a statewide protocol that impacts only the Charleston community as there are no Comprehensive Stroke Centers in the state other than MUSC. Outside of Charleston, this triage protocol will route all patients to their nearest Primary Stroke Center, regardless of patient condition. In Charleston, all patients meeting criteria would route to MUSC. While the state's rationale for creating this policy is understood, Roper St. Francis believes the collaborative stroke efforts spearheaded by MUSC have created a unique system of care that is not easily replicable in other communities. Providers in the LowCountry are working together to improve outcomes and access for our community, and this should be promoted rather than suppressed.</p> <p>Given the protocol is only applicable here, and we have a local solution which both the medical community and MUSC have</p>	<p>designation. Additionally, Section 204.A has been amended to include Thrombectomy-Capable Stroke Centers as a level of recognition.</p>

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		<p>endorsed, Roper St. Francis hereby requests that the EMS protocol allows for local physicians to work collaboratively with their local EMS officials to determine a triage process that most appropriately supports their community's needs.</p> <p>Thank you for your consideration. The remaining sections inclusive of the recognition process, requirements, and registry are all supported as drafted.</p>	
52. Yarley Steedly, American Heart Assn., American Stroke Assn.	400.B	<p><u>Stroke Transport Protocols</u></p> <p>The Stroke Systems of Care Act states it is "in the best interest of the people of South Carolina to modify the state's emergency medical response system to ensure that potential stroke patients are quickly identified and transported to and treated in facilities that have the capability for providing timely and effective treatment for stroke patients." We are pleased to see DHEC's inclusion of language requiring the development and use of EMS transport protocols for suspected stroke victims. Stroke is a critical condition that requires specialized treatment in a short timeframe. As such, transporting the patient to the most appropriate hospital first quickens time to specialized treatment, reduced medical costs, and improves the patient's outcome. The inclusion of transport protocols for stroke mirrors the trauma regulations and maintains consistency within our state across formally recognized systems of care.</p>	<u>Acknowledged.</u>
53. Amy Splittgerber, M.Ed., Exec. Dir., SC Alliance of YMCAs	400.B	<p>The Stroke Systems of Care Act states it is "in the best interest of the people of South Carolina to modify the state's emergency medical response system to ensure that potential stroke patients are quickly identified and transported to and treated in facilities that have the capability for providing timely and effective treatment for stroke patients." We are pleased to see DHEC's inclusion of language requiring the development and use of EMS transport protocols for suspected stroke victims. Stroke is a critical condition that requires specialized treatment in a short timeframe. As such, transporting the patient to the most appropriate hospital first quickens time to specialized treatment, reduced medical costs, and improves the patient's outcome. The inclusion of transport protocols for stroke mirrors the trauma regulations and maintains consistency within our state across formally recognized systems of care.</p>	<u>Acknowledged.</u>
54. Craig McCoy, CEO, Bon Secours St. Francis Health System	400.B	<p>We have several concerns about the proposed Patient Destination Determination guidelines as currently proposed. Under this model a large number of strokes would be transported to Comprehensive Stroke Centers (CSC) for care; bypassing Primary Stroke Centers (PSC) – who, by definition, have demonstrated their ability to provide high quality care. Of all patients who present with stroke like symptoms 25% will be shown to have a stroke mimic (seizure, hypoglycemia), only 10% will receive tPA to dissolve potential stroke causing clots, and only 1% will have endovascular therapy. For 99% of the patients with stroke like symptoms a PSC is an appropriate destination.</p>	<u>Clarified.</u> Section 400.B has been amended to require licensed EMS providers to utilize SC EMS Protocol "Adult Stroke Patient Destination Determination by Stroke Center Capability" after July 1, 2019. This amendment will give hospitals the necessary time to become accredited

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		<p>Getting a patient with an ischemic stroke to a stroke center for rapid evaluation by an emergency physician is and should be our goal. These patients should receive a comprehensive neurologic exam from a physician in the controlled environment of the emergency department; not a rapid screen during a Code 3 transport. CSC are a precious resource. They should be utilized as such, not evaluating every patient with severe stroke symptoms who may or may not benefit from their advanced services. Transporting every patient meeting the current destination guidelines would reduce the efficiency and performance of the CSC facilities; additionally, reduced numbers of stroke patients at the PSC will reduce their efficacy and ability to provide care.</p> <p>We propose that the PSC be utilized to rapidly assess and triage patients with stroke symptoms. Patients with large, severe delayed presentations who cannot benefit from tPA should go directly to a CSC. Other patients should be transported to the closest appropriate facility for evaluation by an emergency physician, CT imaging and determination of severity and transfer if necessary. Our focus as a state should be on primary prevention, identification of at risk groups needing education, encouraging provider education and facility certification, and transporting the most severe stroke who can benefit from CSC services rapidly.</p> <p>Thank you for your work on behalf of the state and for this opportunity to participate.</p>	<p>under the Joint Commission’s forthcoming Thrombectomy Capable designation. Additionally, Section 204.A has been amended to include Thrombectomy-Capable Stroke Centers as a level of recognition.</p>
<p>55. Edward Bender, Dir. of Regulatory Affairs, S.C. Hospital Assn.</p>	<p>400.B</p>	<p>SCHA acknowledges the benefit of hospitals obtaining and maintaining a stroke care certification from a nationally recognized accrediting body. SCHA has and will continue to encourage and assist our members in becoming Stroke Centers. In its current form however, Section 400.B fails to provide hospitals sufficient time to obtain stroke certification before the regulation’s effective date.</p> <p>SCHA recommends delaying the effective date of Section 400.B until January 1, 2021 and creating milestones for hospitals to achieve towards stroke certification leading up to the effective date. Currently there are twenty-three (23) certified Stroke Centers in South Carolina (22 Primary Stroke Centers and 1 Comprehensive Stroke Center). If promulgated in its current draft, the proposed regulation would result in Emergency Medical Services (“EMS”) being required by law to bypass a capable Stroke Center or the majority of South Carolina Acute Care Hospitals who have not received certification.</p> <p>Mandating bypass without giving hospitals time to achieve stroke certification disadvantages patients, non-certified hospitals, and Stroke Centers.</p> <ul style="list-style-type: none"> <li>• Time is of the essence in treating suspected stroke patients and the proposed regulation could potentially put patients at risk because of the extra time required to take them to a Stroke Center when there is a closer hospital capable of initiating and providing care.</li> <li>• Patient volume is a criterion for certification as a Stroke Center. This bypass will further disadvantage</li> </ul>	<p><u>Clarified.</u> Section 400.B has been amended to require licensed EMS providers to utilize SC EMS Protocol “Adult Stroke Patient Destination Determination by Stroke Center Capability” after July 1, 2019. This amendment will give hospitals the necessary time to become accredited under the Joint Commission’s forthcoming Thrombectomy Capable designation. Additionally, Section 204.A has been amended to include Thrombectomy-Capable Stroke Centers as a level of recognition.</p>

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		<p>hospitals hoping to build the patient volume necessary to obtain certification or increase their certification level.</p> <ul style="list-style-type: none"> <li>Hospitals that are Primary Stroke Centers and are endovascular thrombectomy (“EVT”) capable are also disadvantaged because the proposed regulation would require all patients needing EVT to go to a Comprehensive Stroke Center. The requirements to achieve Comprehensive Stroke Center certification are unattainable for some hospitals. Until a fourth certification level is developed by all accrediting bodies to accommodate EVT capable Primary Stroke Centers, these facilities will be bypassed even though they can provide time sensitive, high-quality care.</li> <li>Finally, existing Stroke Centers may be inundated with stroke patients because other hospitals are being bypassed pursuant to this regulation.</li> </ul> <p>Because stroke certification takes time and costs money, it is best to give hospitals time to plan for and obtain certification. In addition, delaying the effective date of this section will allow for accrediting bodies to develop more stroke certification levels to accommodate the broad range of stroke treatment capabilities offered by South Carolina hospitals. SCHA respectfully requests the Department adopt the following language for Section 400.B: <u>B. Effective January 1, 2021, licensed EMS providers...</u>  <u>C. An Acute Care Hospital wishing to become a Stroke Center by January 1, 2021, or that is awaiting the creation of a new certification level must, by January 1, 2019, notify the Department of its intention to pursue certification. That notification must include the level of certification to be pursued and the anticipated date of certification. By January 1, 2020, an Acute Care Hospital wishing to become a Stroke Center must notify the Department it has begun the certification process.</u>  SCHA believes in the benefits of stroke certification and will continue to work with our members to increase the number of Stroke Centers in South Carolina. SCHA simply asks for time to allow hospitals to prepare and plan before the Department mandates policies requiring stroke certification.</p>	
56. Yarley Steedly, American Heart Assn., American Stroke Assn.	500	<u>Statewide Registry</u> We support the language outlining participation in the statewide stroke registry and hope that all acute care hospitals in South Carolina will be encouraged to participate in the registry so they can contribute to stroke patient care through statewide data analysis.	<u>Acknowledged.</u>
57. Lauren McCauley, RN, Piedmont Medical Center	500	<b>Continuous evaluation and improvement of quality of care through utilization of a statewide registry.</b> I believe that it is important for the people of South Carolina that there is a statewide registry so that there is data to analyze so that stroke care can be consistent, streamlined, and any nuances for our State identified.	<u>Acknowledged.</u>

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58. Amy Splittgerber, M.Ed., Exec. Dir., SC Alliance of YMCAs	500	We support the language outlining participation in the statewide stroke registry and hope that all acute care hospitals in South Carolina will be encouraged to participate in the registry so they can contribute to stroke patient care through statewide data analysis.	<u>Acknowledged.</u>
59. Edward Bender, Dir. of Regulatory Affairs, S.C. Hospital Assn.	501	The language in Section 501 appears to limit participation in the State Stroke Registry Database only to Certificate Holders. SCHA encourages the Department to allow hospitals that are not Certificate Holders to participate in the State Stroke Registry Database. SCHA suggests adding the following language to Section 501: <u>C. Any Acute Care Hospital may participate in the State Stroke Registry Database regardless of its status as a Certificate Holder if it follows the procedures for participation described in Section 500 of this Regulation. The Department shall determine a way to recognize Acute Care Hospitals that only participate in the State Stroke Registry Database.</u>	<u>Clarified.</u> The regulation does not preclude any hospital from participating in the State Stroke Registry Database. However, the statute only grants the Department regulatory authority over those hospitals certified by the Joint Commission or other national recognized organization. S.C. Code Section 44-61-640(B).
60. Edward Bender, Dir. of Regulatory Affairs, S.C. Hospital Assn.	501.A	SCHA thanks the Department for securing funding to reimburse hospitals for the “Get with the Guidelines” expenses associated with the State Stroke Registry Database. SCHA also recognizes the Department may not always receive funds for this reimbursement. Accordingly, SCHA suggests the following amendment to Section 501.A: <u>A. All Certificate Holders shall participate in the State Stroke Registry Database as long as the Department has funding available to reimburse the Certificate Holders for their “Get With The Guidelines” expenses. If the Department no longer offers reimbursement it will be in the discretion of the Certificate Holder whether to participate in the State Stroke Registry Database. All Certificate Holders shall participate in the State Stroke Registry Database by:...</u>	<u>Not adopted.</u> Participating in the registry database is a mandatory condition of certification by the Joint Commission and other national recognized organizations. All hospitals certified by the Joint Commission or other nationally recognized organization are required to submit data as a condition of their certification, regardless of state funding.